



DEVELOPMENT SERVICES DEPARTMENT
ENVIRONMENTAL COORDINATOR
450 110TH AVENUE NE, P.O. BOX 90012
BELLEVUE, WA 98009-9012

DETERMINATION OF NON-SIGNIFICANCE

PROPONENT: First United Methodist Church of Bellevue/Tent City 4 (TC4)

LOCATION OF PROPOSAL: 1934 108th Avenue NE

DESCRIPTION OF PROPOSAL: To provide temporary housing for members of Tent City 4.

FILE NUMBER: 09-122033 LZ

The Environmental Coordinator of the City of Bellevue has determined that this proposal does not have a probable significant adverse impact upon the environment. An Environmental Impact Statement (EIS) is not required under RCW 43.21C.030(2)(C). This decision was made after the Bellevue Environmental Coordinator reviewed the completed environmental checklist and information filed with the Land Use Division of the Department of Planning & Community Development. This information is available to the public on request.

- There is no comment period for this DNS. There is a 14-day appeal period. Only persons who submitted written comments before the DNS was issued may appeal the decision. A written appeal must be filed in the City Clerk's office by 5:00 p.m. on _____.
- This DNS is issued after using the optional DNS process in WAC 197-11-355. There is no further comment period on the DNS. There is a 21-day appeal period to end on **October 29, 2009**. This decision may be appealed to Superior Court by filing a land use petition meeting the requirements set forth in Chapter 36.70C RCW. See LUC 20.35.070.
- This DNS is issued under WAC 197-11-340(2) and is subject to a 14-day comment period from the date below. Comments must be submitted by 5 p.m. on _____. This DNS is also subject to appeal. A written appeal must be filed in the City Clerk's Office by 5 p.m. on _____.

This DNS may be withdrawn at any time if the proposal is modified so that it is likely to have significant adverse environmental impacts; if there is significant new information indicating, or on, a proposals probable significant adverse environmental impacts (unless a non-exempt license has been issued if the proposal is a private project); or if the DNS was procured by misrepresentation or lack of material disclosure.

Care Winstead
Environmental Coordinator

October 8, 2009
Date

OTHERS TO RECEIVE THIS DOCUMENT:

State Department of Fish and Wildlife
State Department of Ecology,
Army Corps of Engineers
Attorney General
Muckleshoot Indian Tribe



City of Bellevue
Development Services Department
Land Use Division Staff Report

Proposal Name: **Tent City 4 (TC4)**

Proposal Address: 1934 108th Avenue NE

Proposal Description: To provide a temporary encampment for members of TC4.

File Number: **09-122033 LZ**

Applicant: First United Methodist Church of Bellevue

Decisions Included: Temporary Encampment Permit, Process V

Planner: Antoinette Pratt, Senior Planner, (425) 452-5374

State Environmental Policy Act
Threshold Determination: **Determination of Non-Significance (DNS)**

Carol V. Helland
Carol V. Helland, Environmental Coordinator

Director's Decision: **Approval with Conditions**

Carol V. Helland
Carol V. Helland, Director Land Use
Development Services Department

Application Date: August 5, 2009
Public Notice (600 feet): August 20, 2009
Public Meeting: September 10, 2009
Minimum Comment Period: September 3, 2009
Bulletin Publication Date: **October 8, 2009**
Appeal Deadline: **This decision may be appealed to Superior Court by filing a land use petition meeting the requirements set forth in Chapter 36.70C RCW. See LUC 20.35.070.**

I. Request and Project Description

The First United Methodist Church of Bellevue (FUMCB) requests approval to locate a temporary encampment at 1934 108th Avenue NE for 90 days. An invitation to locate the encampment has been extended by the applicant with a proposed installation date of October 31, 2009 to January 28, 2010.

The Bellevue City Council approved Ordinance No. 5615 on July 25, 2005, which established decision criteria for Temporary Encampments within the City of Bellevue. In January, 2006 a Consent Decree was entered in federal court resolving certain challenges raised to the validity of the Ordinance. The Consent Decree commits the City to apply certain interpretations of the ordinance to all future temporary encampment applications, including the proposal by FUMCB. See Para. 3.2 & 3.3 of Consent Decree.

FUMCB applied for a permit on August 5, 2009. Because FUMCB is a religious institution, it is permitted to host Tent City 4 (TC4) as an accommodation of religious exercise pursuant to Land Use Code (LUC) 20.30U.120. Reverend Dr. Beryl Ingram, pastor of FUMCB has included a theological justification in support of the application. See Attachment A for a review of these religious precepts.

II. History of Tent City

TC4 is a temporary encampment that has been located in Eastside cities and King County since May 17, 2004. It is modeled after Tent City 3 (TC3), which began operation in Seattle on March 31, 2000. TC4 is sponsored and supported by two non-profit organizations, SHARE (Seattle Housing and Resource Effort) and WHEEL (Women's Housing Equality and Enhancement League), which also operate more traditional homeless shelters in Seattle.

TC4's day-to-day operations are managed by its residents. TC4 provides tents for up to 100 residents, but its average occupancy is approximately 60 to 70 people, including single adults and couples; children are not housed at TC4 except for brief emergency periods. The residents monitor entry into the camp, and they attempt to deny entry to anyone who is discovered to be on the sex offender database or has an outstanding arrest warrant. TC4 has operated in Bothell, unincorporated King County, Woodinville, Kirkland and Bellevue. Currently, TC4 is located at Holy Spirit Lutheran Church at 10021 NE 2nd Street, in Kirkland.

The stated purpose of TC4 is to help homeless individuals stay together in a communal setting that provides safety and shelter rather than being on their own in the elements. The encampment also allows its participants to store their belongings while away from camp at work and appointments.

TC3 and TC4 are both designed to be democratic and self managed. Encampment residents contribute to work necessary shifts for camp maintenance and functioning. The residents hold weekly meetings to elect leaders, who are tasked with camp operations and enforcement of encampment rules and a Code of Conduct, requiring among other things sobriety, non-violence and cooperation. See Attachment B for the Code of Conduct. Encampment rules require that those violating the Code be held accountable.

III. Site Context and Description

FUMCB is located on the east side of 108th Avenue NE between NE 19th Place and NE 20th Street. The surrounding properties adjacent to the church are predominately single-family to the north, south, and east property boundaries. The site is bounded by 108th Avenue NE on the west property boundary. FUMCB has been operating in this location since its construction in 1955 and is 3 acres in size.



Access to FUMCB occurs at the northwest corner through a one way driveway with egress occurring at the southwest portion of the site. The site contains approximately 183 parking stalls. A vegetative buffer is located along the west building elevation with parking located behind the building to the east. Site topography rises from 108th Avenue NE to the parking lot to the east which is fairly flat to the easterly property boundary. Existing landscape buffers provide an overstory and understory vegetation between the church and adjacent residential properties. Most of the trees along these

property lines are predominantly evergreen with a mix of deciduous trees.

See Attachments C and D for zoning and site maps.

IV. Proposed Site Layout

TC4 is proposed to be located in the middle of the FUMCB's parking lot 50 feet south and west of the north and east property boundaries. There will be one opening provided for ingress and egress for the encampment, located at the northwest corner of the encampment. At this opening, TC4 proposes to place its security tent so there will be direct monitoring of individuals seeking entry to the encampment and to also monitor the activities of current residents. In addition to the security tent, tents for storage and blankets will be located near this ingress/egress access point.

Tents are proposed to be located in the center of the encampment between the proposed fencing. Four foot walkways will be maintained between each row of tents. A large 20 by 40 foot tent that is designated as the "Hilton" will be located at the northeast corner of the encampment for use by men who are new to Tent City. They will be housed there until they can be accommodated in a private tent. The shower will be located west of the "Hilton." The TV and kitchen tents will be located adjacent to the shower.

TC4's garbage can will be located southwest of the encampment; approximately 50 feet from the south property line within the parking lot and across from the church's screened waste area. Electricity will be provided from an electrical connection along the north elevation of the church from the encampment. Cord protection from the vehicular traffic will be provided via minor ramps to prevent wheels from crushing encampment power cords. A temporary connection will occur at this location so that the shower can have heated water. Directly adjacent to the blankets tent will be four portable toilets. The Fire Department requires a secondary access that

will be limited to emergency egress only. The emergency egress will be located at the southeast corner of the encampment. A 6 foot chain link gate with dark sight obscuring material shall be used to maintain screening and limit access from this emergency egress.

There is one hose bib located along the north building elevation that will provide potable water for the encampment. See Section VII for utility comments regarding water connection. See Attachment D for the revised site plan forming the basis for the Director's decision.

V. Consistency with Land Use Code/Zoning Requirements

A. General provisions of the Land Use Code as interpreted through the Consent Decree

This site is located within an R-2.5 zoning district. As such, LUC 20.10.440, Services chart (as amended by Ordinance No. 5615) permits Temporary Encampments subject to permit approval. The applicant has filed for the permit necessary to process a request to locate a Temporary Encampment at the FUMCB. The following tables summarize the Land Use Code requirements, as clarified and interpreted by the Consent Decree, applicable to the proposal, and the proposal's compliance with those requirements.

B. Encampment Management Responsibility Plan (LUC 20.30U.121)

(Please note that the table below summarizes the requirements of the LUC/Consent Decree. In the event of any conflict between the summary of the requirements provided below and the text of the LUC/Consent Decree, or in the event the summary below is incomplete, the LUC/Consent Decree prevails).

Category	LUC Requirements	Applicant's Response	Compliance with LUC/Consent Decree
Security Measures LUC 20.30U.121.A.1	1. Description of security measures; 2. Code of conduct; 3. Neighborhood security patrols; 4. Background checks for outstanding warrant or sex offender status; 5. How residents may be ejected	1. Provided 2. Provided 3. Provided 4. Provided 5. Provided	1. Yes 2. Yes 3. Yes 4. Yes 5. Yes
Liability and Management Agreements LUC 20.30U.121.A.2	1. Liability/Insurance documentation 2. Liability agreement between Encampment Host, Encampment Sponsor or Encampment Manager.	1. Provided 2. Liability agreement between FUMCB and SHARE/WHEEL submitted with application.	1. Yes. Staff has obtained a copy of FUMCB's insurance certificate which is located in the project file. 2. Yes. Copy of liability agreement provided with application submittal.
Transportation Plan LUC 20.30U.121.A.4	Documentation of closest bus stop	Provided	Yes
Site Plan LUC 20.30U.121.A.5	Required for overview of camp layout	Provided—Revision received September 10, 2009 (1)	Yes. Attachment D is the site plan on which the Director's decision is based.

1 The original site plan did not contain aisle width dimensions. Additionally, due to the economic downturn, TC4 requested that FUMCB reduce the number of parking stalls from four to one so that tents could be provided in this area. These tents will be located south of the fire exit. The revised site plan contains all aisle width dimensions and additional tent capacity.

Street Address LUC 20.30U.121.A.6	Address of host facility	Provided	Yes. Pursuant to Para. 3.2 of the Consent Decree, no hardship exception is necessary. FUMCB's address is considered the permanent address for purposes of compliance with the LUC.
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C. Applicable Procedures (LUC 20.30U.122)

Category	LUC Requirements (LUC 20.30U.122)	Applicant's Response	Compliance with LUC
Public Meeting LUC 20.30U.122.A	Required prior to permit issuance	Meeting held at FUMCB on September 10, 2009.	Yes
Meeting w/Bellevue Police LUC 20.30U.122.A	See Section VI for discussion of meetings and comment and Section VII.7 for Police Comments	Meeting held on September 2, 2009.	Yes
Meet with schools and known daycares (1) LUC 20.30U.122.B	See Section VI for discussion of meetings and comments	Required meetings held in May and September 2009.	Yes
Mailed Notice to owners w/in 600 feet LUC 20.30U.122.B	Send public notice of meetings to real property owners within 600 feet of site	City fulfilled public notice which took place August 20, 2009.	Yes
Signs Posted LUC 20.30U.122.C	One required sign per street frontage	City installed required sign using contracted third party	Yes

(1) See Attachment E for map of known schools and daycares within 600 feet of the FUMCB.

D. Temporary Encampment Use Requirements (LUC 20.30U.125). FUMCB's application included requests for hardship exceptions to the ordinance. Hardship exceptions and compliance with the LUC and Consent Decree are documented as referenced below with related conditions.

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
Code of Conduct LUC 20.30U.125 2.a through j	1. Prohibited Items or Activities: Illegal Substances Alcohol Weapons(knives 3.5 inches or larger) Violence Open flames Trespassing on private property Loitering in adjacent neighborhood 2. Neighborhood trash patrol every other day	1. Code of Conduct provided to address all required elements and appropriately prohibits all required elements. 2. Will have individuals conducting trash patrol at required intervals	1. Yes 2. Yes

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
Number of Residents LUC 20.30U.125.A.3	100 resident maximum allowed	100 resident maximum requested	Yes. Provided condition met to support maximum occupancy. <u>See Section XI for related condition.</u>
Length of Stay LUC 20.30U.125.A.4	60 days maximum	Hardship exception requested: Proposing 90 days	Yes. Hardship exception granted. 90 day stay granted based upon religious tenants provided by Reverend Dr. Beryl Ingram consistent with Para. 3.3.1 of the Consent Decree. See Attachment A <u>See Section XI for related condition.</u>
Location Frequency LUC 20.30U.125.A.5	Once every 18 months	No previous encampment at this location.	Yes. No other camps previously sited at FUMCB. Any future application to host encampment at this site will be subject to restriction based on last date of encampment occupancy and para.3.4 of the consent Decree.
Transportation Plan LUC 20.30U.125.A.6	<ol style="list-style-type: none"> 1. Within ½ mile radius to bus stop 2. After hours transport 	<ol style="list-style-type: none"> 1. There are two bus stops on Bellevue Way that are within 1/3 mile radius. 2. Metro has several buses that operate on these roadways that operate during business and evening hours. Volunteer drivers and taxis are also available. 	<ol style="list-style-type: none"> 1. Yes 2. Yes See Section VII for further discussion.
Parking LUC 20.30U.125.A.7	Unspecified	One parking stall will be designated to TC4 operators which have been designated at the northwest corner of the encampment (see site plan).	Yes
Setbacks LUC 20.30U.125.A.8.a Fence LUC 20.30U.125.A.8.b	<ol style="list-style-type: none"> 1. 50 feet as required for churches for side and rear property lines. 20 feet as required for church for front property line. 2. 6 foot sight obscuring fence required. 3. Single point of access 	<ol style="list-style-type: none"> 1. Tents fulfill 50 foot setback from rear and side property lines and 20 feet from the front yard setback. Fence located to maximize screening. 2. Will provide 6 foot cyclone fence with a dark sight obscuring material 3. The secondary egress required by the Fire Department will be for emergency egress only. 	<ol style="list-style-type: none"> 1. Yes. Location of tents satisfies applicable rear, side and front yard setbacks. <u>See Section XI for related condition.</u> 2. Yes 3. Yes
Children LUC 20.30U.125.A.9	No children permitted under 18 (2)	Help minors accessing TC4 to find alternate shelter.	Yes

2 Homeless children in distress are permitted one night's stay temporarily until human services are found to specifically meet their needs.

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
Resident ID Check LUC 20.30U.125.A.10	1. Verifiable ID required 2. Overnight resident log	1. Will conduct ID checks to screen for outstanding warrants and sex offender rosters. 2. Reverend Dr. Beryl Ingram to maintain resident log.	1. Yes. Detailed in Encampment Management Plan. 2. Yes. The Director approves retention of the log by Reverend Dr. Beryl Ingram, a representative of the Encampment Host, pursuant to LUC 20.30U.125.A.10 and para. 3.2 of consent decree.
Health & Safety Regulations Water Supply Common Container Non-potable water LUC 20.30U.125.A.11.a. i-iii	1. Hot and cold water accessible to food and toilet facilities 2. Use of common containers prohibited 3. Non-potable water labeled.	1. Hardship exception requested: Only 4 sinks to be provided with this application. Three will have both hot and cold water adjacent to shower. One sink located near toilets as proposed on Attachment D 2. Intends to use a common container for coffee and water per para 3.2 of the consent decree. 3. No response to this item.	1. Yes. Hardship exception not necessary. Complies with Para. 3.2 of Consent Decree. See <u>Section XI for related condition.</u> 2. Yes. Hardship exception not necessary. Complies with Para. 3.2 of Consent Decree. See <u>Section XI for related condition.</u> 3. Yes. See <u>Section XI for related condition.</u>
Sewage and Wastewater Disposal LUC 20.30U.125.A.11.b. i-ii	1. Meet sewage and wastewater disposal in accordance to code. 2. Portable toilets must comply with KCC Section 8.20.	1. Gray water from the shower will be connected to on-site side sewer. 2. Tent City will provide their own portable toilets for their residents that meet KC standard.	1. Yes 2. Yes
Electrical and Lighting LUC 20.30U.125.A.11.c	1. Electrical must meet City standards. 2. Lighting equipment must meet City standards.	1. Tent City will obtain an electrical permit from the City to install a temporary electrical panel per IBC. 2. Lighting to meet req. of LUC 20.20.522.	1. Yes. Compliance with standard demonstrated by securing permit. See <u>Section XI for related condition.</u> 2. Yes
Hand Washing and Bathing Sinks Showerhead Waste containers LUC 20.30U.125.A.11.d. i-vi	1. Sinks: 1:15 people, 2 adjacent to toilet, 1 next to food prep area and cleaned daily. 2. Showerhead: 1:40 people, shower must have floor drains, cleaned daily. 3. Waste containers: cleanable and nonabsorbent.	1. Hardship exception requested: Proposing 4 sinks/100 residents. 2. Hardship exception requested: Proposing 1 showerhead/100 residents. 3. Waste containers are cleanable and nonabsorbent.	1. Yes. Complies with Para. 3.2 of Consent Decree. Refer to <u>Section XI for related condition.</u> 2. Yes. Complies with Para. 3.3.3.1 of Consent Decree. See <u>Section XI for related condition</u> and list of other publicly available showers. See resource guide from Human Services in Attachment H. 3. Yes.

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
<p>Toilets</p> <p>LUC 20.30U.125.A.11.e. i-ii</p> <p>Toilets (cont.)</p>	<p>1. 1:15 toilets per person</p> <p>2. Cleaned daily</p>	<p>1. Hardship exception requested to provide 4 portable toilets/100 residents.</p> <p>2. Proposed cleaning 3 times a week by professional service. Daily surface cleaning on days when not professionally cleaned.</p>	<p>1. Yes. Complies with Para 3.3.4 of Consent Decree. <u>See Section XI for related condition.</u></p> <p>2. Yes. Complies with Para 3.3.4 of Consent Decree. <u>See Section XI for related condition.</u></p>
<p>Cooking and Food Handling</p> <p>LUC 20.30U.125.A.11.f. i-v</p>	<p>1. Common areas: enclosed and separate from sleeping areas.</p> <p>2. Sink with hot and cold potable water</p> <p>3. Nonabsorbent food prep area</p> <p>4. Mechanical refrigeration</p>	<p>1. Kitchen is adjacent to TV and storage tents.</p> <p>2. Hardship exception requested to allow compliance with 4 sinks and hand sanitizer</p> <p>3. TC4 has nonabsorbent food prep area</p> <p>4. Hardship exception requested to allow use of ice chests rather than mechanical refrigeration</p>	<p>1. Yes. Kitchen is separate from sleeping areas, and enclosed.</p> <p>2. Yes. Complies with Para. 3.2 of Consent Decree. <u>See Section XI for related condition.</u></p> <p>3. Yes</p> <p>4. Yes. As conditioned in Section XI, complies with Para. 3.3.5 of Consent Decree. <u>See Section XI for related condition.</u></p>
<p>Maintenance of Bedding</p> <p>LUC 20.30U.125.A.11.g</p>	<p>Bedding must be maintained in a clean and sanitary condition.</p>	<p>Blankets are cleaned weekly by a professional service hired by SHARE/WHEEL.</p>	<p>Yes</p>
<p>Refuse</p> <p>LUC 20.30U.125.A.11.h. i-vi</p>	<p>1. Comply with sanitation code</p> <p>2. Prevent rodent harborage</p> <p>3. Storage in secure, impervious and cleanable containers</p> <p>4. Provide stand</p> <p>5. Locate 100 feet from tent areas</p> <p>6. Empty regularly</p>	<p>1. Will provide required number of trash cans.</p> <p>2. Trash taken to dumpster everyday.</p> <p>3. 6 yard dumpster emptied twice a week.</p> <p>4. Not providing a stand for trash cans.</p> <p>5. Locating 100 feet from tent areas.</p> <p>6. Emptied regularly.</p>	<p>1. Yes</p> <p>2. Yes</p> <p>3. Yes</p> <p>4. Yes. Complies with Para. 3.2 of Consent Decree. <u>See Section XI for related condition.</u></p> <p>5. Yes</p> <p>6. Yes</p>
<p>Insect and Rodent Control</p> <p>LUC 20.30U.125.A.11.i</p>	<p>Take measures to control insects and rodents.</p>	<p>TC4 will manage refuse as described above.</p>	<p>Yes. No specific measures are anticipated, absent a rodent or insect condition during term of encampment.</p>

Category	LUC Requirements (LUC 20.30U.125)	Applicant's Response	Compliance with LUC
Disease Prevention and Control LUC 20.30U.125.A.11.j. i-iii Disease Prevention and Control (cont)	1. Report to Seattle & King County Health certain known or suspected communicable diseases 2. Report following immediately to Seattle & King County Health: <ul style="list-style-type: none"> ▪ Suspected food poisoning ▪ Unusual prevalence of fever, diarrhea, sore throat, vomiting or jaundice ▪ Productive cough or weight loss is prominent among residents 3. Individual with communicable disease cannot prepare or serve food.	1. TC4 proposes to follow requirements applicable to schools and daycares, as outlined in WAC 246-101-415 and 246-101-420. 2. TC4 proposes to follow requirements applicable to schools and daycares, as outlined in WAC 246-101-415 and 246-101-420. See Attachment F for State requirements. TC4 also proposes to follow the Recommended Shelter Standards. See Attachment G for State regulations. 3. No individual with communicable disease will serve food in compliance with standards above.	1. Yes. Complies with Section 3.2 of Consent Decree. 2. Yes. <u>As conditioned in Section XI</u> , complies with para. 3.2 of Consent Decree. See Attachments F and G for guidelines. 3. Yes
Exterior Lighting LUC 20.30U.125.A.12	1. Directed on site 2. No blinking, high intensity 3. Appropriate scale.	1. Use of existing lighting at FUMCB's site. 2. Use of household lighting standard for security tent near entry of encampment for night time use. 3. Existing parking lot lighting.	1. Yes 2. Yes 3. Yes, See Section XI for related condition.

VI. Public Comment Information

Public Correspondence: To date, staff has received seven emails/letters regarding this proposal.

FUMCB's Outreach Meetings

The FUMCB held one outreach meeting on the TC4 proposal as summarized below:

1. June 3rd: FUMCB held a public meeting with its adjacent neighbors. There were approximately twenty neighbors who attended this meeting along with members from TC4. Meeting minutes have also been provided which are available in the project file.
2. May 27th: There are three daycare/schools within 600 feet of this site: Little Explorers Daycare, Bellevue Montessori School, and a home daycare operator.
 - a. The administrator of Little Explorers Daycare stated that she had no questions or concerns regarding TC4's deployment to FUMCB. She stated that she would let her parents know of the scheduled TC4 stay at FUMCB.
 - b. The school administrator of Bellevue Montessori had no questions or concerns and would also alert parents of TC4's stay in the neighborhood.
 - c. The home daycare operator stated that she supports TC4's ministry but thought the neighborhood would have concerns about children catching the school bus on Bellevue Way. She thought that the church might want to increase security for children while walking to school. She also wanted to know about TC4's quiet hours

which were relayed to her. See VI.3.d below for further discussion regarding FUMCB's response to additional security for school aged children.

Additional follow up was requested by City staff to ensure that each provider above had an opportunity to comment given the start of a new school year, 2009-2010. Both of the administrators for Little Explorers and home daycare still had no further questions and do not desire a parent meeting. However, Bellevue Montessori held an informational meeting on September 23, 2009, that was attended by a FUMCB member and a TC4 representative. No further requests were made.

Additionally, FUMCB recently offered classroom space to a new Montessori school, Eastside Montessori. The operator for the school was notified of TC4's pending deployment when she signed her lease. A FUMCB member is available to meet with the operator if parents request an informational meeting.

3. **City Public Meeting:** In addition to the above outreach meetings, the LUC requires the City to hold a public meeting on this proposal. This meeting was held September 10, 2009, with public notice going to property owners within 600 feet of this site. There were many individuals who attended this meeting from the adjacent neighborhood. FUMCB had members of its encampment committee available along with TC4 who had approximately 8 members. See the project file for those who signed the sign-in sheet. Representatives from Development Services and Bellevue Police Departments conducted the meeting. The following is an overview of comments/requests made:

a. **Bellevue Police Department (BPD):** BPD reported the results of the Meet and Confer Meeting that took place earlier on September 2, 2009, between TC4, FUMCB and BPD.

City Response: BPD discussed the agreed safety plan/procedures. BPD will have additional patrols in the area during the scheduled stay and time will be split between bike officers and vehicle drive-bys. The new downtown police unit will be an additional resource for the area as well. See Section VII.7 for additional BPD discussion.

b. **FUMCB—Daycare/Preschool Reporting:** FUMCB reported the results of the preschool/daycare meetings that were held in May 2009 based upon item #2 above. No one from the affected schools/daycares attended the City public meeting.

City Response: No further response necessary.

c. **TC4 Overview:** TC4 discussed the origins of TC3 and TC4 to provide an overview of how the encampment came into existence and why they are necessary. They also discussed how the encampment is operated and the accountability of its residents when living in TC4.

City Response: No further comments necessary.

d. **Neighborhood Comments:** City staff received many verbal comments on this proposal. The following is an overview of comments heard during the September 10, 2009, public meeting.

- Why is TC4 being located in my neighborhood? Temporary Encampments are not permitted within the City of Bellevue except as an accommodation of religious exercise.

This means that any religious facility in Bellevue may host TC4. However, per the Consent Decree, TC4 is only permitted to come to Bellevue once a year.

- Does the neighborhood have an opportunity to vote on this application? The Director of the Development Services Department is the authorized individual to approve or disapprove a temporary encampment application. No other entity may approve or disapprove a discretionary land use decision.
- How will communicable diseases be handled within the encampment? TC4 will follow the State standards for daycare and schools as shown in Attachment F. Additionally, they will follow the King County Public Health Standards as noted in Attachment G.
- The neighborhood has many children that walk to school. How will children be protected during this interim period that TC4 is within the neighborhood? FUMCB understands this neighborhood concern and has determined that it will monitor the supervision of two bus stops on 108th and work with parents, church members and neighborhood volunteers to support bus stop safety while TC4 is on-site. Any bus stop volunteer who will interact with children will be required to complete and submit a Washington State Patrol screening form to be checked for any history of child abuse. FUMCB requires this already for any church members who work with youth members (see email dated September 23, 2009).
- What happens to individuals that are turned away/rejected from TC4? BPD stated those individuals with outstanding warrants will be arrested. If a resident is ejected from the camp for breaking the Code of Conduct, the person will be escorted to the nearest bus on Bellevue Way, or to the Downtown Transit Station, or will be script for taxi fare. See Section VII.7 below for further BPD comments concerning TC4.

VII. City Department Analysis

1. Transportation Department

LUC 20.30U.121.A.4 requires an encampment sponsor to submit a transportation plan demonstrating compliance with LUC 20.30U.125.A.6, which includes the following two issues:

- "A Temporary Encampment shall be within one half mile of a public transportation stop...." The proposed location is within one third mile of a Metro bus stop located at NE 20th and Bellevue Way so this condition is satisfied.
- "During hours when public transportation is not available, the encampment host, encampment sponsor, or encampment manager shall also make transportation available to anyone who is rejected from or ordered to leave the Temporary Encampment." Transportation will be provided via volunteer drivers or taxis to the downtown Bellevue Transit Center at 108th Avenue NE and NE 6th Street when people are rejected from the encampment when Metro buses are not available on Bellevue Way. Bus schedules and phone numbers for volunteer drivers and taxis will be posted in the encampment's security tent.

See Section XI for related condition.

2. Human Services Division

The Human Services Division has created a Resource Information Booklet which will be given to all TC4 residents upon arrival to FUMCB. The booklet contains listings of food banks and local stores in the North Bellevue subarea. This booklet also contains information regarding alternate locations where residents may shower in addition to the one on-site shower that TC4

proposes. See Attachment H for copy of the resource guide. See Section XI for related condition.

3. Fire Department

- a. Provide a second marked exit from the tent compound.
- b. Provide fire extinguishers at approved locations.
- c. Fire Inspection required prior to occupancy.

See Section XI for related conditions.

4. Building Department

The Building Department has reviewed this proposal and determined that an electrical permit is required for this project. See Section XI for related condition.

5. Utilities Department

The Utilities Department has approved this proposal. No Utilities permit is required. However, sewer maintenance staff must witness connection to the existing side sewer for disposal of gray water from the shower. You may contact Dave Dickson at (425) 452-4359 to set up a time for him to look at the sewer connection.

6. Clearing and Grading Division

The clearing and grading division has reviewed and approved this proposal.

7. Bellevue Police Department

On September 2, 2009, the Bellevue Police Department (BPD) held a required meet and confer meeting with the FUMCB representatives and TC4 staff to review the Encampment Management Responsibility Plan. This meeting was an opportunity for the BPD to review the required security plan of this document. BPD noted TC4's normal protocol to turn away residents rejected from the encampment. BPD requested that BPD shall be promptly notified when a crime is occurring; a physical or verbal disturbance is occurring; an unwanted person is refusing to leave; a subject is present who has an outstanding warrant for their arrest; a subject is present who is required to register as a sex offender; and/or a subject is present who is a respondent to an Order for Protection, Anti-Harassment Order, or No Contact Order. TC4 security patrol personnel operating outside the encampment will wear orange vests for identification purposes. TC4 has verbally agreed to these requirements. As a condition of approval, the above requirements of BPD shall be followed by TC4. See Section XI for related condition.

TC4 will also continue to conduct their criminal records check with King County Sheriff's Department for their required screening. BPD accepts this protocol and has established a liaison relationship with King County so that the City will also have connection with them as well. This fulfills the requirement of the ordinance.

VIII. State Environmental Policy Act (SEPA)

The environmental review indicates no probability of significant adverse environmental impacts occurring as a result of the proposal. The Environmental Checklist and supplemental

documentation submitted with the application adequately discloses expected environmental impacts associated with the project. The City codes and requirements, including the Clear and Grade Code, Utility Code, Land Use Code, Noise Ordinance, Building Code and other construction codes adequately mitigate expected environmental impacts. Therefore, issuance of a Determination of Non-Significance (DNS) is the appropriate threshold determination under the State Environmental Policy Act (SEPA) requirements. The Environmental Checklist is available for review in the project file.

IX. Applicable Decision Criteria

Temporary Encampment: The Director may approve or approve with modifications an application for a Temporary Encampment Permit if it complies with the decision criteria of Land Use Code Section 20.30U.130. After conducting the various administrative reviews associated with this proposal, including Comprehensive plan goals and policies and the Land Use Code provisions, the following conclusions are made with regard to the Temporary Encampment decision criteria:

1. The Temporary Encampment complies with the Use Requirements set out in LUC 20.30U.125, and other applicable requirements of this Code; and

The Director incorporates the discussion and information in Sections V here as demonstration of the proposal's compliance with the requirements of the Code. As conditioned in Section XI, the Director finds that the requirements of the LUC and interpreted through the consent decree are satisfied.

2. The Temporary Encampment will not be materially detrimental to the public health, safety or welfare of the Temporary Encampment residents or the surrounding community; and

The FUMCB has communicated with its adjacent neighbors, conducted a meet and confer conference with the Bellevue Police Department and met with the preschool administrators to comply with the meeting requirements for schools and daycares within 600 feet of their site. See Section VI for concerns identified by the neighborhood and area schools.

Additionally, the City has found that FUMCB and SHARE/WHEEL have responsibility to assure the health and safety of Temporary Encampment residents, as well as the surrounding community. To fulfill this requirement, the applicants have proposed to conduct the following to meet safety and health standards for both encampment residents and the adjacent neighborhood:

- Installing a 6 foot sight obscuring fence on all sides of the encampment.
- Conducting security or ID checks with King County Sheriff's Department for its residents.
- Reporting disturbances to BPD for action along with residents found to have outstanding warrants or who are on a sex offender list.
- Maintaining quiet hours as stated within the SEPA checklist.
- Following proper cleaning standards for potable water containers and toilet facilities on site.
- Obtaining an electrical permit for the necessary panel installation for the shower facility.

The conditions imposed by the City in Section XI will avoid material detriment to both the encampment residents and the adjacent neighborhood. See Section XI for related conditions.

- 3. The imposition of a condition under which the City reserves the right to impose additional conditions or to reconsider the Temporary Encampment Permit within a certain timeframe from approval date, based upon complaints filed with the City.**

The City reserves the right to add additional conditions of approval on this Temporary Encampment based upon any future complaints that are received after issuance of this permit. The applicants should be aware that the approval of this encampment permit may at any time be revoked if the proposed use or its impacts are at any time substantially modified or changed from the stated application. See Section XI for related conditions.

X. Decision of the Director

After conducting the various administrative reviews associated with this proposal, including applicable Land Use consistency, SEPA, City Code, Standard and Consent Decree compliance reviews, the Director of Development Services Department does hereby **APPROVE THE APPLICATION WITH CONDITIONS:**

XI. Conditions of Approval for Encampment Permit:

- 1. Security Protocol with BPD:** BPD shall be promptly notified when a crime is occurring; a physical or verbal disturbance is occurring; an unwanted person is refusing to leave; a subject is present who has an outstanding warrant for their arrest; a subject is present who is required to register as a sex offender; and / or a subject is present who is a respondent to an Order for Protection, Anti-Harassment Order, or No Contact Order.

Authority: LUC 20.30U.121.A.1 and 20.30U.125.A.2
Reviewer: Captain Denny Bronson, (425) 452-6171

- 2. Transportation Plan:** The encampment security tent shall have posted the appropriate bus schedules, the phone numbers for emergency drivers and taxis, and the location of the nearest twenty-four hour transit center to which rejected persons will be transported when Metro buses are not available on Bellevue Way.

Authority: LUC 20.30u.121.A.4; LUC 20.30U.125.A.6.
Reviewer: Rohini Nair, (425) 452-2569

- 3. Maximum Number of Encampment Residents:** The maximum number of encampment residents shall be 100, based on the application materials contained in the record as of the date of this decision. See Conditions 11 and 12 below for requirements related to provision of shower facilities and additional toilets based on encampment occupancy.

Authority: LUC 20.30U.125.A.3
Reviewer: Antoinette Pratt, (425) 452-5374

- 4. Length of Stay:** The Director has granted TC4 a 90-day encampment stay on the grounds of the FUMCB. The duration of the encampment is permitted to extend from October 31, 2009 to January 28, 2010.

Authority: LUC 20.30U.125.A.4; Consent Decree Para. 3.3.1
Reviewer: Antoinette Pratt, (425) 452-5374

5. **Fence Location:** The fence shall incorporate dark, sight obscuring material to screen the entire encampment from public view. Minimum side and rear yard setbacks are 50 feet. A secondary egress to fulfill the Fire Department secondary fire exit requirement shall be constructed as shown on the submitted site plan at the southeast corner of the encampment. This egress shall contain a 6-foot chain link gate with sight obscuring screening.

Authority: LUC 20.30U.125A.8.b
Reviewer: Antoinette Pratt, (425) 452-5374

6. **Maintenance of Overnight Resident Log:** FUMCB's management shall maintain an overnight resident log of individuals in the encampment.

Authority: LUC 20.30U125.A.10
Reviewer: Antoinette Pratt, (425) 452-5374

7. **Water Supply and Adjacency:** The applicant shall implement the following protocol related to water supply and adjacency for at least one hot water hand wash sink to be located adjacent to food preparation facilities so long as the following is complied with:

- a. The hot water sink is located as near to the food preparation areas as the site will reasonably allow; or
- b. If the hot water sink is located farther than 100 feet from the kitchen tent, then a cold water sink shall be located within 100 feet of the kitchen tent.

Authority: LUC 20.30U.121.A.5; 20.30U.125.A.11.a.i; 20.30U.125A.11.f.i; Consent Decree Para. 3.3.6
Reviewer: Antoinette Pratt, (425) 452-5374

8. **Community Containers and Potable Water Sources:** Water and coffee containers and carafes shall be washed once weekly with bleach and hot water and only potable water sources shall be used to fill such containers. Any containers used for non-potable water shall be labeled as such.

Authority: LUC 20.30U.125A.11.a.ii; Consent Decree Para. 3.2
Reviewer: Antoinette Pratt, (425) 452-5374

9. **Electrical Permit:** An electrical permit shall be secured to install an external 220 volt outlet along the north wall of the encampment for the shower unit located at this elevation. This work shall be reviewed and approved by the Building Department prior to use.

Authority: BCC 23.30.030; LUC 20.30U.125.A.11.c
Reviewer: Lee Kranz, (425) 452-2732

10. **Number of Sinks:** In addition to the four proposed sinks, the following conditions shall be met: (1) at least one hand washing sink with hot water is located adjacent to the food preparation area or consistent with the terms of Condition 7 above; and (2) hand sanitizer is provided at each sink location in the Temporary Encampment, in the kitchen area, and at the security tent.

Authority: LUC 20.30U.125.A.11.d.i; Consent Decree Para. 3.2
Reviewer: Antoinette Pratt, (425) 452-5374

11. **Number of Toilets:** The provision of toilets in the encampment shall comply with the requirements of LUC 20.30U.125A.11.e.i (A), provided that 1) the City of Bellevue shall identify and secure a funding source for the professional cleaning at least three times per week of each toilet required over four toilets; 2) more than five toilets shall only be required where space is available at the Encampment site without compromising the ability to house the allowed maximum number of encampment residents. Pursuant to Section 3.3.4 of the Consent Decree, additional toilets shall be required whenever the occupancy of TC4 exceeds certain thresholds for two successive City of Bellevue inspections:

- 61 to 75 – 5 toilets required
- 76 to 90 – 6 toilets required
- 91 to 100(max) – 7 toilets required

Authority: LUC 20.30U.125A.11.e.ii (A); Consent Decree Para. 3.3.4

Reviewer: Antoinette Pratt, (425) 452-5374

12. **Number of Showers:** In addition to the one on-site shower, whenever TC4 occupancy at the site exceeds 40 residents, the Encampment Host or Encampment Manager shall provide bus tickets to encampment residents, which may be used to access other shower facilities. Other shower facilities include the Bellevue Aquatic Center.

Authority: LUC 20.30U.125A.11.d.ii; Consent Decree Para.3.3.3.2

Reviewer: Antoinette Pratt, (425) 452-5374

13. **Refrigeration:** The applicant shall implement the following protocol related to perishable food storage in the absence of mechanical refrigeration:

- a. Ice chests are maintained at a temperature of 45 degrees or less and thermometers are placed in all ice chests and read below 45 degrees
- b. Ice for ice chests is replenished daily (when necessary to maintain temperature)
- c. Ice chests are in working order and fitted with tightly fitting lids
- d. Ice chests are cleaned at least weekly with a bleach solution and thoroughly rinsed prior to re-use;
- e. Shared meals for the majority of residents are not prepared on-site;
- f. The Encampment Manager, Encampment Host and/or Encampment Sponsor shall promptly comply with any suggestions, correction notice or other direction provided by the Department of Public Health – Seattle and King County regarding food preparation and storage on-site.

Authority: LUC 20.30U.125A.11.f.v; Consent Decree Para 3.3.5

Reviewer: Antoinette Pratt, (425) 452-5374

14. **Trash Can Stands:** As an acceptable alternative to providing trash can stands, Rubbermaid trash cans with liners shall be used throughout the encampment, each equipped with snap tight lids. All trash shall be bagged, removed from the encampment, and taken to the dumpster at least once a day to prevent rodents, insects and other animals accessing cans. Trash containers shall be located adjacent to the food area, and within 100 feet of any sleeping tent.

Authority: LUC 20.30U.125.A.11.h; Consent Decree Para 3.2

Reviewer: Antoinette Pratt, (425) 452-5374

15. **Disease Prevention and Control:** Incidents of suspected food poisoning; unusual prevalence of fever, diarrhea, sore throat, vomiting, or jaundice; or productive cough or weight loss among residents shall be reported immediately to Seattle & King County Public Health. Additionally, TC4 shall follow requirements applicable to schools and daycares, as outlined in WAC 246-101-415 and 246-101-420 in Attachments F and G.

Authority: LUC 20.30U.125.A.11.j.ii; Consent Decree Para. 3.2
Reviewer: Antoinette Pratt, (425) 452-5374

16. **Fire Extinguishers:** Fire extinguishers are required. Individual locations of each extinguisher within the encampment will be verified during field inspection by fire inspector.

Authority: International Fire Code (IFC 906)
Reviewer: Adrian Jones, (425) 452-6032

17. **Second Marked Exit:** Provide a second marked exit from the tent compound.

Authority: IFC 1006
Reviewer: Adrian Jones, (425) 452-6032

18. **Minimum Aisle Width Between Tents:** Maintain a minimum aisle width of 44 inches between tents for aisles.

Authority: IBC/IFC Section 1021
Reviewer: Adrian Jones, (425) 452-6032

19. **Revocation of Temporary Encampment Permit:** The City reserves the right to impose additional conditions or to reconsider the Temporary Encampment Permit within a certain timeframe from approval date, based upon complaints filed at the City. Approval of a Temporary Encampment Permit may at any time be revoked if the use is substantially changed from the stated application for this proposal.

Authority: LUC 20.30U.130.C and 20.30U.135
Reviewer: Antoinette Pratt, (425) 452-5374

20. **Future Revisions to Site Plan:** No revisions shall be made to the approved site plan during operation prior to approval by the City.

Authority: LUC 20.30U.121.A.5
Reviewer: Antoinette Pratt, (425) 452-5374

Attachments

- A. Statement of Faith—Reverend Dr. Beryl Ingram, FUMCB
- B. Code of Conduct—TC4
- C. Zoning Map
- D. Plans and Drawings
- E. Map of Schools and Daycares within 600 feet.
- F. Communicable Health Standards for Schools and Daycares, Notifiable Conditions Definitions & Standards
- G. Recommended Shelter Health and Safety Best Practice Guidelines—Seattle/King County
- H. TC4 resource Guide—Human Services Division

ATTACHMENT A
(Statement of Faith—Reverend Dr. Beryl Ingram)



**FIRST UNITED METHODIST
CHURCH** of
BELLEVUE

June 11, 2009

Toni Pratt
Land Use Director of the Department of Planning and Development
City of Bellevue, Washington

Dear Toni,

First United Methodist Church is pleased to be in a position to host Tent City 4 [TC4] this approaching autumn and winter [October 2009– January 2010]. As you probably know, Methodists have a long history of social justice witness. Our founder, John Wesley, said, “The gospel of Christ knows no religion but social, no holiness but social holiness. You cannot be holy except as you are engaged in making the world a better place. You do not become holy by keeping yourself pure and clean from the world but by plunging into ministry on behalf of the world’s hurting ones.” We are eager to ‘plunge into ministry’ with our sisters and brothers who are currently homeless.

We are grateful that the terms of the Federal Court Consent Decree allow churches to petition to host TC4 for a 90 day period instead of only 60 days. Please grant our request for this hardship exemption so that the residents of TC4 will not have to move in the bitter cold of late December. Their lives are difficult enough as it is, and we are truly looking forward to their being part of the circle of God’s grace at 1934 108th Ave. NE through the holidays. Thank you for your consideration.

Sincerely,

The Rev. Dr. Beryl A. Ingram
Sr. Pastor

ATTACHMENT B
(Code of Conduct)

SHARE/WHEEL TENT CITY4

CODE OF CONDUCT

WE, THE PEOPLE OF SHARE/WHEEL,
IN ORDER TO KEEP A MORE HARMONIOUS COMMUNITY,
ASK THAT YOU OBSERVE THE FOLLOWING CODE OF CONDUCT:

SHARE/WHEEL'S TENT CITY4 IS A DRUG AND ALCOHOL FREE ZONE.
THOSE CAUGHT DRINKING OR USING DRUGS
WILL BE ASKED TO LEAVE. SOBRIETY IS REQUIRED.

NO WEAPONS ARE ALLOWED.
KNIVES OVER 3-1/2 INCHES MUST BE CHECKED IN.

VIOLENCE WILL NOT BE TOLERATED.
PLEASE ATTEMPT TO RESOLVE ANY CONFLICT
IN A CREATIVE AND NONVIOLENT MANNER.

DEGRADING ETHNIC, RACIST, SEXIST OR HOMOPHOBIC REMARKS ARE
NOT ACCEPTABLE. NO PHYSICAL PUNISHMENT, VERBAL ABUSE OR
INTIMIDATION WILL BE TOLERATED.

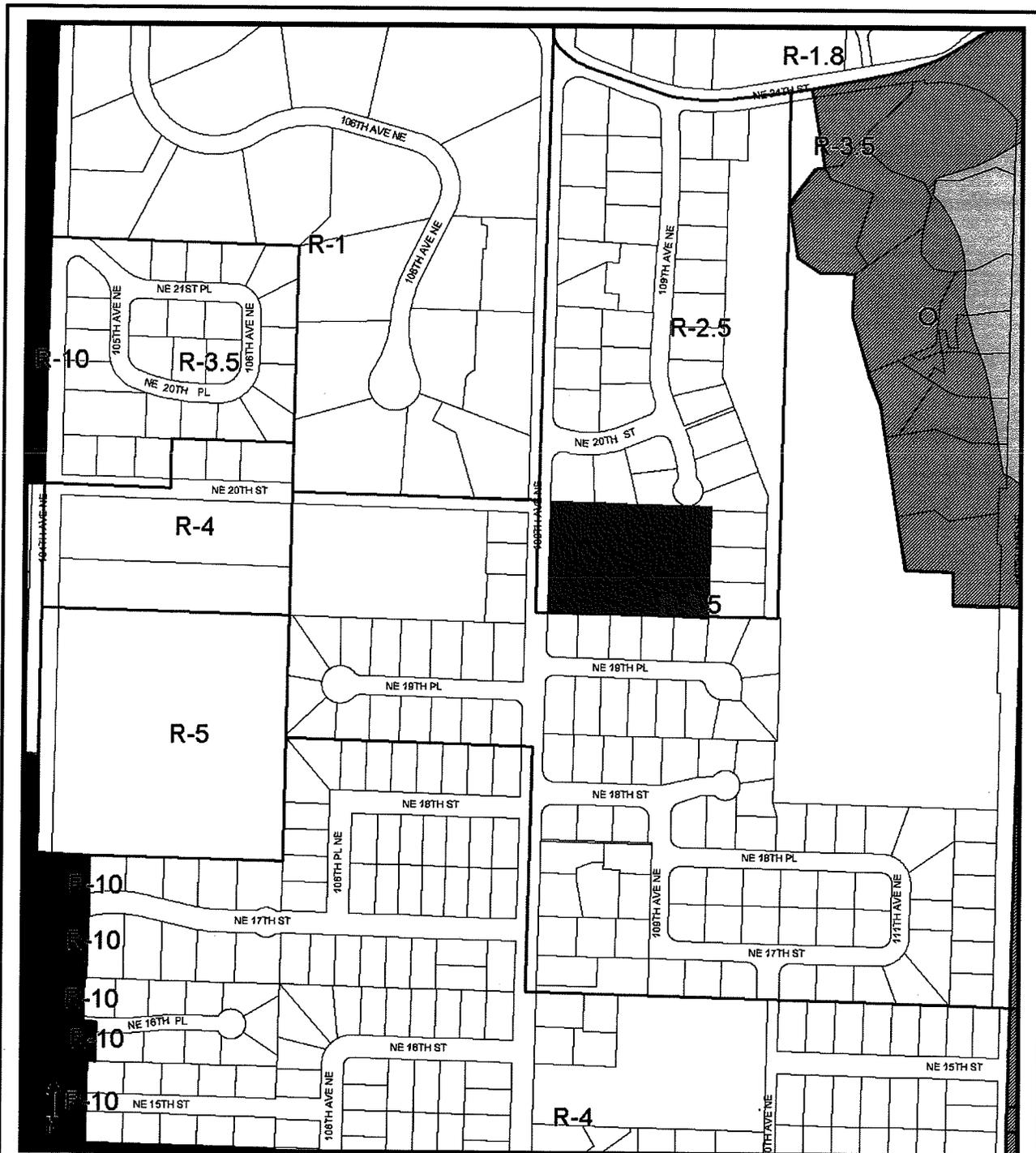
WE ARE A COMMUNITY.
PLEASE RESPECT THE RIGHTS AND PRIVACY
OF YOUR FELLOW CITIZENS.

NO MEN IN THE WOMEN'S TENTS.
NO WOMEN IN THE MEN'S TENTS.
NO OPEN FLAMES.
NO LOITERING OR DISTURBING NEIGHBORS.
NO TRESPASSING.

ATTENDANCE OF AT LEAST ONE OF THE SEVERAL COMMUNITY
MEETINGS HELD THROUGH THE WEEK IS REQUIRED.
DAYS AND TIMES WILL BE POSTED SO THAT YOU MAY WORK IT INTO
YOUR SCHEDULE.

IF THESE RULES ARE NOT RESPECTED AND ENFORCED,
TENT CITY4 MAY BE PERMANENTLY CLOSED.

ATTACHMENT C
(Zoning Map)



City of Bellevue
 Information Technology
 Geographic Information Services
 September 17, 2009

**Zoning
 TC4**

- | | | | |
|--|---------------------|--|-------------------------------|
| | Single Family | | Subdistrict A |
| | Multi Family | | Subdistrict B |
| | Office | | Subdistrict C |
| | Commercial | | Downtown Core |
| | Light Industrial | | Single Family Transition Zone |
| | Evergreen Highlands | | Multi Family Transition Zone |
| | Institutional | | |

This map is derived from the Bellevue Geographic Information System and designed for City staff use. It is not guaranteed accurate.

If you have specific questions concerning information contained on this map please contact the department shown.



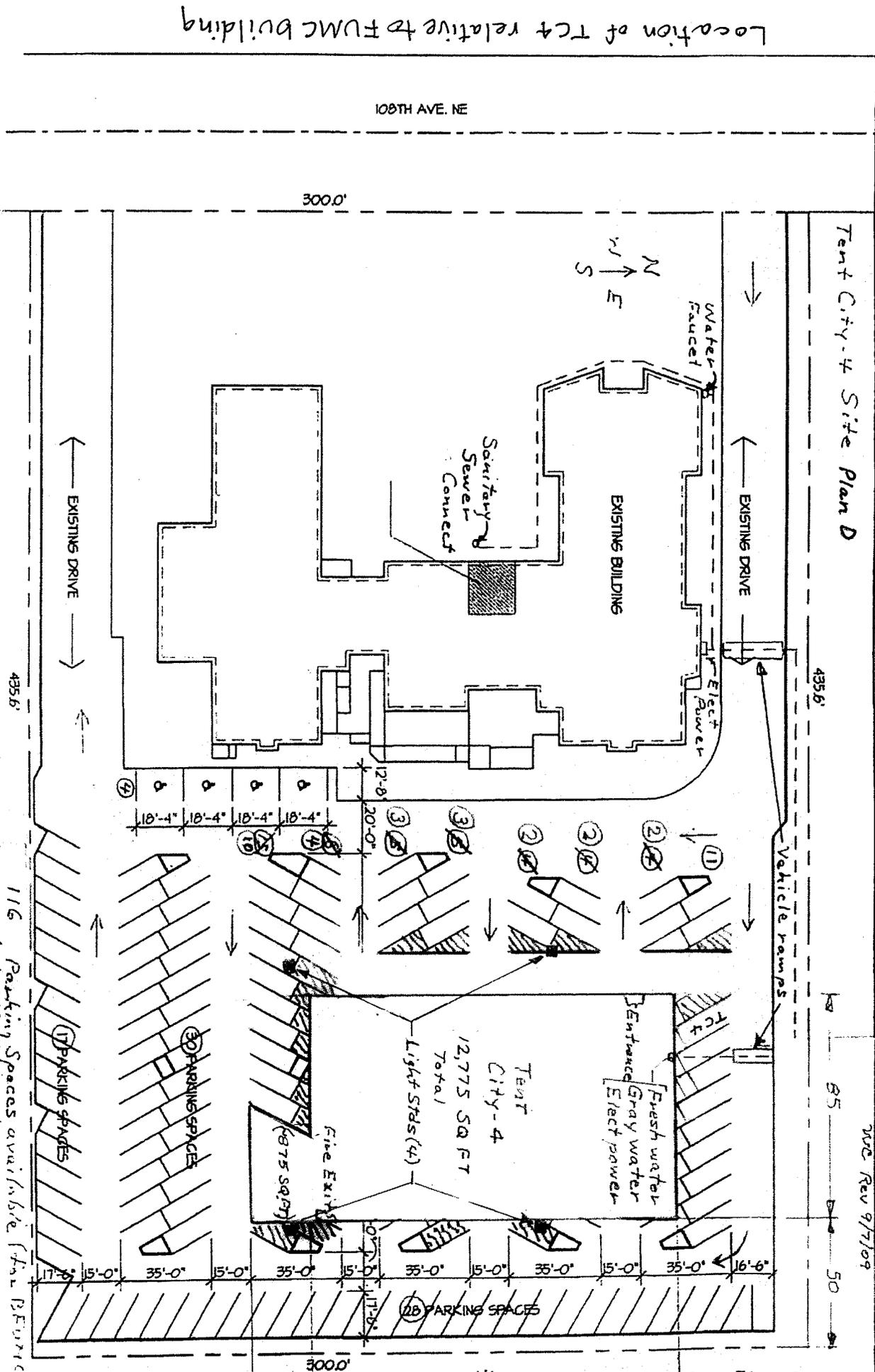
VICINITY MAP

ATTACHMENT D
(Plans and Drawings)

First United Methodist Church of Bellevue
1934 108th Ave NE, Bellevue, WA 98004-2828

Tent City-4 Site Plan D

L. Wayne Catlin 8/13/09
MVE Rev 9/7/09

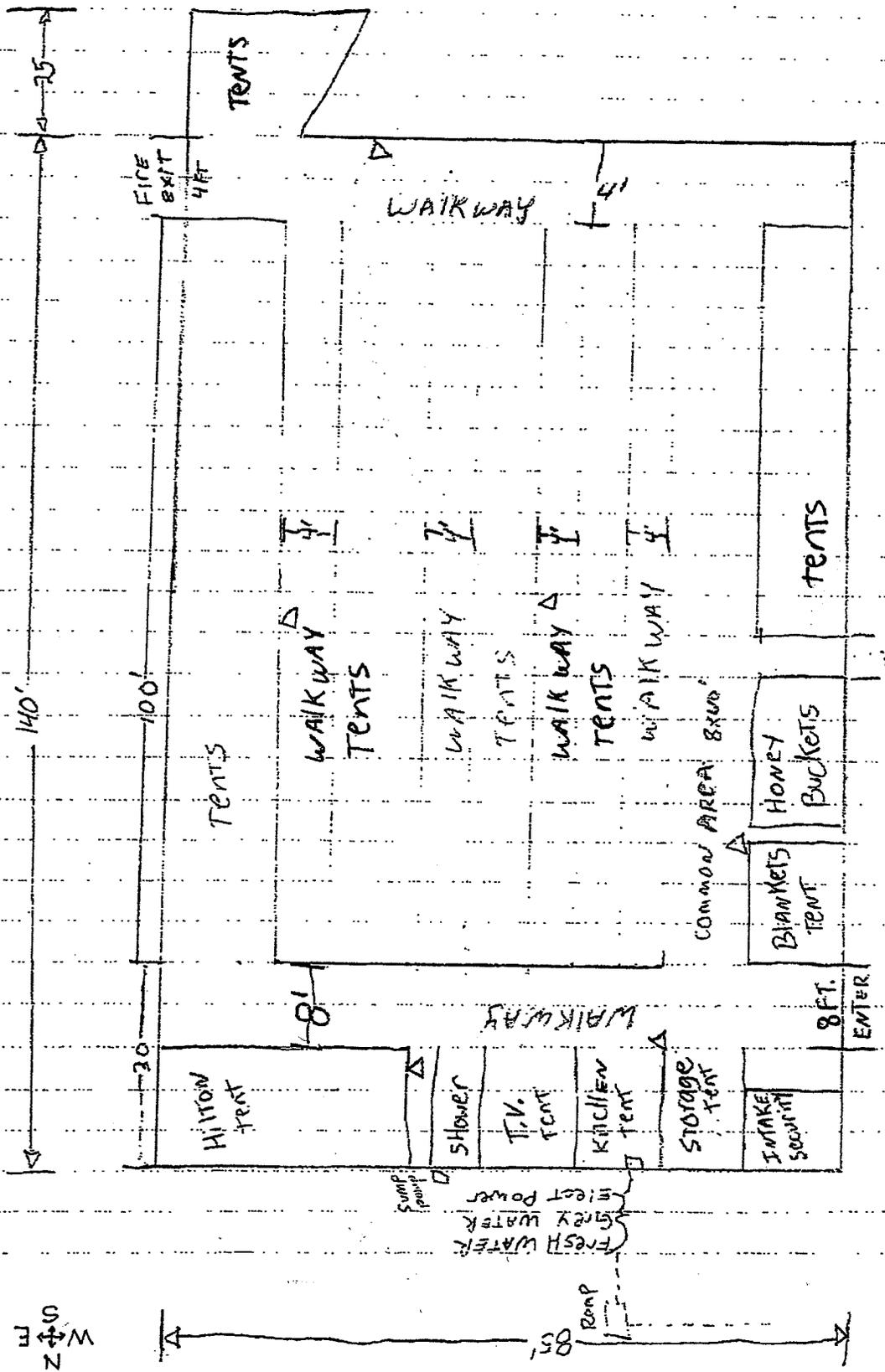


Location of TCA relative to FUMC building

Release no: TCA Site Plan D.pdf

116 Parking Spaces available for future with TCA in place.

INTERIOR DIAGRAM of TCA



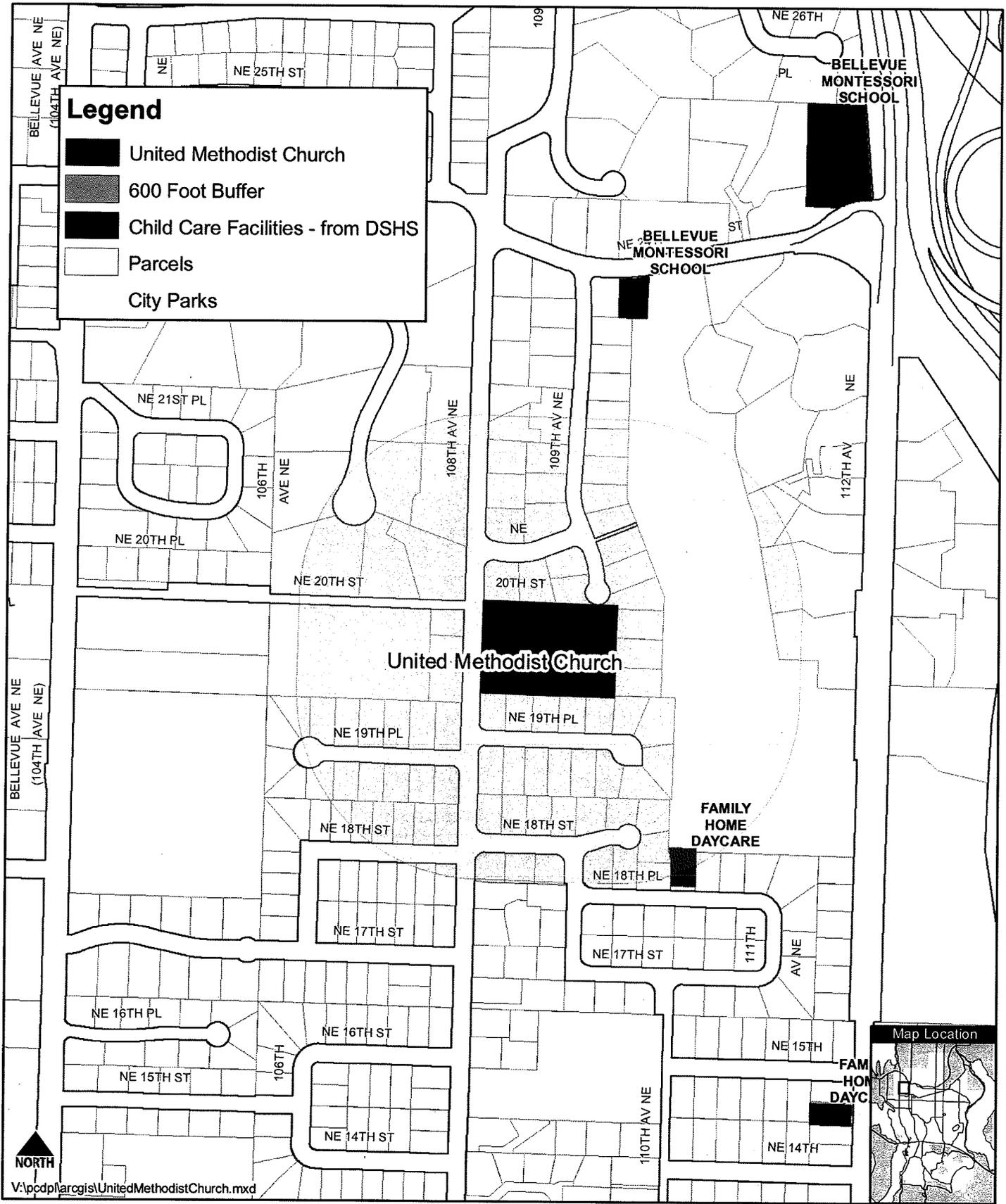
W
N
S
E

TENT CITY 4 SITE PLAN 9/22/9
Randy Dequise

Δ = FIRE EXT.

⊗ ALL WALKWAYS UNOBSTRUCTED

ATTACHMENT E
(Daycare and Schools within 600 feet)



Scale bar = 420 feet

City of Bellevue
IT Department
GIS Services

Plot Date: 4/9/2009

City of Bellevue United Methodist Church

The information on this map is a geographic representation derived from the City of Bellevue Geographic Information System. The City of Bellevue does not guarantee that the information on this map is accurate or complete. This map is provided on an "as is" basis and disclaims all warranties, express or implied, including but not limited to warranties of merchantability, fitness for a particular purpose and non-infringement. Any commercial use or sale of this map or portions thereof, is prohibited without express written authorization by the City of Bellevue. The City of Bellevue is not responsible for any damages arising from the use of information on this map. Use of this map is at user's risk. Users should verify the information before making project commitments.

ATTACHMENT F
(State Requirements for Daycares and Schools)

WAC 246-101-420

Agency filings affecting this section

Responsibilities of schools.

Schools shall:

(1) Notify the local health department of cases or suspected cases, or outbreaks and suspected outbreaks of disease that may be associated with the school.

(2) Cooperate with the local health department in monitoring influenza.

(3) Consult with a health care provider or the local health department for information about the control and prevention of infectious or communicable disease, as necessary.

(4) Cooperate with public health authorities in the investigation of cases and suspected cases, or outbreaks and suspected outbreaks of disease that may be associated with the school.

(5) Personnel in schools who know of a person with a notifiable condition shall release identifying information only to other individuals responsible for protecting the health and well-being of the public through control of disease.

(6) Schools shall establish and implement policies and procedures to maintain confidentiality related to medical information in their possession.

[Statutory Authority: RCW 43.20.050. 00-23-120, § 246-101-420, filed 11/22/00, effective 12/23/00.]

WACs > Title 246 > Chapter 246-101 > Section 246-101-415

246-101-410 << 246-101-415 >> 246-101-420

WAC 246-101-415

Agency filings affecting this section

Responsibilities of child day care facilities.

Child day care facilities shall:

(1) Notify the local health department of cases or suspected cases, or outbreaks and suspected outbreaks of notifiable conditions that may be associated with the child day care facility.

(2) Consult with a health care provider or the local health department for information about the control and prevention of infectious or communicable disease, as necessary.

(3) Cooperate with public health authorities in the investigation of cases and suspected cases, or outbreaks and suspected outbreaks of disease that may be associated with the child day care facility.

(4) Child day care facilities shall establish and implement policies and procedures to maintain confidentiality related to medical information in their possession.

[Statutory Authority: RCW 43.20.050. 00-23-120, § 246-101-415, filed 11/22/00, effective 12/23/00.]

ATTACHMENT G
(Recommended Shelter Health and Safety Best Practice Guidelines--
Seattle/King County)

Recommended Shelter Health and Safety Best Practice Guidelines

Public Health – Seattle & King County

**Health Care for the Homeless Network
999 Third Avenue, Suite 1200
Seattle, Washington 98104
<http://www.metrokc.gov/health/hchn/>**

July 2005



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Revised:

April 1996 With input from the Communicable Disease Control and Environmental Health Divisions of the Seattle-King County Public Health Department.
December 1996 With input from shelter provider advisory group. TB info updated.
February 1999
May 2005

Please direct questions or suggestions about these standards to:

Heather Barr, RN, Public Health Nurse, Ph (206) 296-5091
Health Care for the Homeless Network, a program of Public Health – Seattle & King County

Permission to reproduce and distribute this document is granted.

All information is general in nature and is not intended to be used as a substitute for appropriate professional advice.

COMMUNICABLE DISEASE CONTROL HAND WASHING

General Information:

- Hand washing is the single most effective and least costly way to reduce the spread of infections, including the common cold, hepatitis A, food borne illnesses, and many other viral and bacterial diseases.
- Alcohol-based hand rub is also effective in limiting the spread of such diseases.
- Shelter and other environments should encourage and support good hand hygiene.

Facility Recommendations & Environmental Modifications:

Ensure that your shelter or facility has:

- Posters encouraging *frequent* hand washing posted in common areas.
- Posters showing proper hand washing *technique* posted by all sinks.
- Sinks and hand washing facilities that are easily accessible to staff and clients.
- Sinks that are kept in good repair, drain properly, and have both hot and cold water.
- Soap dispensers that contain soap and are in good working order. Non-refillable soap dispensers are recommended.
- Disposable towels available.
- Facial tissues such as Kleenex available for staff and clients. Tissues help contain sneezes and coughs and provide a barrier for hands. Trash cans should be available for proper disposal of tissues.
- Alcohol-based hand rub dispensers installed at entry areas.

Staff Recommendations:

Staff should:

- Model and encourage good hand hygiene.
- Wash their hands immediately after using the toilet.
- Wash their hands before serving, preparing or eating food.
- Wash their hands before and after providing any “hands on” assistance to clients (such as assisting with mobility, balance, health or hygiene needs).
- Wash their hands after handling clients’ unwashed clothing or bedding.
- Wear aprons/coveralls and gloves when handling soiled laundry to reduce risk of infection.
- Wear gloves when handling client belongings to reduce risk of infection from bacteria, viruses, lice or mites, and to reduce risk of infection by needle stick.

Procedural Recommendations:

- Encourage staff and clients to wash or sanitize hands upon entering the shelter. This will effectively reduce the number of germs entering the shelter. Alcohol-based hand rub dispensers installed at entry areas encourage this practice.
- Do NOT use cloth towels or re-use paper towels.
- Instruct clients and volunteers who serves or prepare food to wash their hands ahead of time.
- Ensure that your shelter has a policy regarding blood borne pathogens control (“Standard Precautions in the Shelter Setting”).

COMMUNICABLE DISEASE CONTROL FOOD HANDLING

Improper food handling can spread infection to large groups of people at one time. Food borne illnesses nearly always result in vomiting, diarrhea and malaise, all of which are particularly difficult for homeless people to endure. Therefore conscientious adherence to food handling standards is strongly encouraged.

For further information please see the Public Health – Seattle & King County Food Handling Guidelines at <http://www.metrokc.gov/health/foodsfty/>. To arrange for further education about food safety issues at your site contact Environmental Health at (206) 296-4632.

Facility Recommendations & Environmental Modifications:

- The kitchen area is clean. A cleaning schedule is posted and adhered to.
- Kitchen counter tops are intact and are sanitized before food preparation begins.
- Surfaces where people eat are smooth, intact, and easily washable. Sanitize all surfaces before food is served.
- Dish washing is accomplished safely and appropriately:
 - 1) Hand dish washing uses a three compartment sink (wash, rinse, sanitize)
 - 2) Dishwashers have a high temperature sanitizing rinse (170 F) or a chemical sanitizer.
 - 3) Cutting boards are washed, rinsed, and sanitized between each use.
- Thermometers are placed and kept in all refrigerators and read below 41 F.

Procedural Recommendations:

- Staff who handle food have current food handlers' permits.
- Staff, client volunteers, and outside volunteers wash hands before preparing or serving food.
- Staff wash their hands after handling uncooked meat, before handling other food or utensils.
- Ill people are not permitted to prepare or serve food to others.
- Foods are cooked to temperatures as required by code.
- Foods delivered from outside sources are held at 140F or hotter (or 41F or lower for cold foods) and the temperatures are checked when the food arrives. A log is kept of temperature checks on all meals.
- Foods that have been donated should comply with the current WA Food Code guidelines for donated food (see <http://www.doh.wa.gov/ehp/sf/Pubs/FoodRule/food-donations-guidelines-1204.doc> or the code at <http://www.leg.wa.gov/WAC/index.cfm?section=246-215-151&fuseaction=section>)
- Foods to be warmed are reheated to at least 165 F and checked with a long-stem thermometer prior to being served.

To view the Washington State Food Code & the May 2005 Code revisions visit:
<http://www.doh.wa.gov/ehp/sf/food/FoodRuleMain.htm> or call Environmental Health for more information (206) 296-4632.

ENVIRONMENTAL SAFETY INJURY PREVENTION

Facility Recommendations & Environmental Modifications:

- Stairs are in good repair, equipped with a handrail, and are not slippery.
- A First Aid Kit is kept in an accessible location, appropriately stocked, and checked monthly.
- A telephone is accessible for calls to 911.
- The shelter has an approved sharps bio-hazard container to collect used needles and syringes and has a policy for the proper disposal of these items.
- Emergency preparedness supplies are fully stocked and are replaced as necessary.
- In facilities serving children, appropriate childproofing measures and modifications have been made including: childproof electrical outlets, locked screens or other barriers to prevent children from falling out of upper floor windows, stairwell gates, doors that open from inside without a key, and precautions to protect children from burns and other injuries.
- All playground equipment, toys, and diapering areas are safe and adhere to safety standards.

Procedural Recommendations:

- No weapons are permitted on the shelter premises.
- The possession and use of illegal substances is prohibited on the shelter premises.
- There is a policy for proper disposal of needles and syringes.
- The shelter has begun preparing for earthquakes and other potential disasters. There is a plan to be prepared by _____ (date), including both supplies and written plans/protocols.

ENVIRONMENTAL SAFETY BURN PREVENTION

Facility Recommendations:

- The shelter adheres to the Uniform Fire Code applicable to transient accommodations.
- Smoke detectors are placed in appropriate areas and are functional. Batteries are changed on a regular schedule.
- Exits are clearly marked. Illuminated exit signs are functional.
- Evacuation routes are posted and visible.
- Staff are trained in evacuation procedures.
- Fire drills are conducted regularly.
- There are ____ (#) fire extinguishers. They are in working order and are checked monthly.
- Staff are trained in the use of fire extinguishers.
- The water heater is set at 120 F to prevent scalding burns.

ENVIRONMENTAL SAFETY – SANITATION AND HYGIENE

Environmental Quality:

- The water is safe to drink and free of contamination.
- The air quality is good:
 - No fumes or noxious odors are present (i.e. paint fumes, cleaning solutions).
 - Smoking is restricted to designated areas.
 - A source of fresh air is available (i.e. there are windows and doors that open).
 - The ventilation system is functional.
 - If there is no automatic H-VAC system, windows and/or doors are left open for 10-15 minutes several times per day to provide air exchange.

Maintenance:

- Indoor and outdoor environments are clean and free of debris.
- Floors are washed daily and carpeted areas vacuumed daily.
- Floors are cleaned immediately after any spills.
- There are enough trashcans available for clients and staff so that trash is easily disposed of and cans are not overflowing. Garbage cans are lined with a plastic bag and have covers.
- Garbage (biodegradable matter such as food) & trash (paper/plastic/refuse) are removed daily.
- Janitorial equipment and supplies are in good repair and have a designated storage space. Cleaning supplies and chemicals are kept out of children's reach and separate from food.
- Pest control is done on a regular basis. The premises are pest-free, to the extent possible.

Kitchens and Bathrooms:

- Plumbing is in working order in the showers, sinks, and toilets.
- Kitchen, bathrooms, and common areas have posted cleaning schedules that are adhered to. Kitchen and bathrooms are cleaned at least twice daily, preferably after high-use periods.
- Sanitary napkins, tampons, disposable diapers are disposed of in specially provided containers that are lined with plastic bags and emptied daily.
- Signs are posted in the bathrooms/showers that discourage clients from sharing personal items. (Signs can be obtained from Public Health Nurse at 296-4656)

Bedding:

- Laundry facilities have adequate capacity. Dryers can attain 165F.
- Bedding is stored in such a way that used bedding does not contact other used bedding or other clean bedding.
- New clients are issued fresh bedding upon arrival at the shelter. Bedding is changed weekly.
- Bedding is laundered weekly if used by the same client for a week.
- Soiled bedding is washed immediately.
- Mats are washable and covers are intact or adequately repaired. Mats are wiped down with a 1:10 bleach solution or other sanitizing solution if not used by the same client.

Client Belongings:

- Client belongings are stored in such a way that one client's possessions are not in contact with another client's possessions. Items hung on hooks have enough space between them so they don't touch. This helps control the spread of scabies and lice.
- Shelters encourage clients to not share personal items such as toothbrushes, combs, brushes, razors, or any tattoo, piercing, self-mutilation ("cutting"), or injection implements in order to reduce the risk of infection or infestation.

CLIENT HEALTH

It is important to have some basic health information about clients in shelter settings in order to:

- a) **Better plan for their care**
- b) **Ease or prevent discomfort and suffering**
- c) **Help prevent the spread of disease from sick to healthy clients**

Procedural Recommendations:

- Ensure that the shelter has a mechanism for referring clients with no health care provider.
- Make sure that any client who appears to be ill or injured is questioned and referred to a health care provider. (see “Communicable Disease Symptom Identification and Referral”)
- Briefly screen clients who seek help or who appear ill or injured for emergent medical and psychiatric needs they may have including detox, emergency care, and referral to a health care provider.
- For shelters where a stay of greater than one week is anticipated or documented, a more detailed health intake should be conducted. Collect basic health information from clients including: current symptoms, medications, allergies, usual health care provider, emergency contact name and phone number, next of kin.
- Register all shelter clients daily. This is important in case of fire or other disaster, or in the event of an out break of TB or other infectious illness to help determine who was exposed.

The following sample policies, protocols, and guidelines are available from Seattle-King County Health Care for the Homeless Network. They have been developed by the HCHN Public Health Nurse and are included in this document as appendices. Call (206) 296-5091 for further information on these topics.

Sample Policy – Topics:

- **Basic Health & Safety Standards/Communicable Disease Control**
- **Standard Precautions in the Shelter Setting**
- **Blood/Bodily Fluid Exposure**
- **Blood/Bodily Fluid Clean-up Protocol**
- **Laundry Hygiene in the Shelter Setting**
- **Scabies Policies and Procedures**
- **Lice Policies and Procedures**
- **Staff Health**
- **General Cleaning**
- **Kitchen Hygiene**

**CLIENT HEALTH
COMMUNICABLE DISEASE SYMPTOM IDENTIFICATION AND REFERRAL**

Early identification of clients who present with signs or symptoms which may indicate the presence of a communicable disease can help reduce the risk of disease outbreaks.

Symptom	Response
Persistent cough	<p>Screen client for tuberculosis*:</p> <ul style="list-style-type: none"> Has cough lasted three weeks or longer? Has the client lost weight recently or notices clothing fits more loosely? Is the client extremely fatigued? Does the client have a fever? Does the client sweat heavily at night? <p>Clients who respond affirmatively to three weeks of coughing and who also have one or more of the other symptoms listed above will be referred to a health care provider for evaluation as soon as possible.</p> <p>To the best of their ability shelter staff will then:</p> <ul style="list-style-type: none"> • Separate persistently coughing clients from the general population. • Instruct persistently coughing clients to cover their cough with their inner elbow or shirt, jacket, or Kleenex tissue. • Provide masks for clients to assist with covering their cough. • Refer coughing clients to on-site health care providers or nursing staff. <p>These measures may also help limit the spread of colds, flu, pertussis and other airborne illnesses/diseases. In addition they may assist the client in getting help for other chronic respiratory problems such as asthma, emphysema, or allergies which may share similar symptoms (such as persistent coughing).</p>
Diarrhea or Vomiting (> 2-3 days)	<p>Encouraged client to see a health care provider as soon as possible. Instruct client to observe stringent hand washing and/or frequent use of alcohol-based hand rub.</p>
Itchiness, Persistent scratching, Unusual rash	<p>Refer client to a healthcare provider as soon as possible.</p>
Untreated lice or scabies	<p>Allow client to stay the night, but send them to a health care provider for treatment as soon as possible.</p>

* Please see the Seattle-King County TB Control Guidelines for Homeless Service Agencies for more information about procedures related to TB control.

STAFF HEALTH

Procedural Recommendations:

- Shelters should maintain a *daily census* listing all staff, volunteers, and clients who are at the facility. This practice serves both security and infection control purposes. For example, if a person with a case of active TB is found to have stayed at the shelter, a daily census allows health department officials to know who was at the site when and to determine who may have been exposed. In the event of an evacuation or other emergency, roll call can be taken to avoid losing anyone.
- A TB counseling, screening, and prevention program for homeless agency staff—including volunteers who expect to work for cumulative hours of more than 10 hours—should be established to protect both staff and clients. Screening requirements should be included in the agency TB policy, in job descriptions, and in personnel policies. All homeless shelters should have a written and enforced policy that staff will be required to show proof of TB screening.
- Agencies should appoint one person responsible for documenting TB status and skin-test results of all staff and volunteers. The tuberculosis and immune status of staff members is confidential health information and individual privacy needs to be protected by law.
- If a client at the shelter is found to have active tuberculosis, the shelter manager and staff will cooperate with the Health Department's investigation of the case.

Immunizations:

- Staff are strongly encouraged to bring their immunization status up to date including tetanus, measles, and rubella.
- Staff are encouraged to obtain flu vaccines each flu season, and to be vaccinated against Hepatitis B.

TB Screening & Testing*:

- Public Health—Seattle & King County recommends different TB screening practices for homeless agency staff than it does for their clients. These recommendations are based on well-researched models of TB control and efficient use of resources.
- All homeless agency staff should be screened for TB every 6-12 months, depending on the incidence of active TB cases at your facility.
- Staff that have not had documented TB screening with a skin test within the last 12 months will be required to undergo two step baseline TB skin testing (1-3 weeks apart).
- The first TB skin testing should be done prior to or on the first day of employment.
- Homeless agency staff who have positive PPD test results should be identified and evaluated to rule out a diagnosis of active TB.
- Staff who are symptomatic (show signs of disease) or suspected of having active TB should be immediately excluded from the workplace until confirmed non-infectious. They should also be required to have an immediate medical evaluation through the TB Clinic at Harborview Medical Center, a Public Health Clinic site, or their private medical provider. The medical evaluation will include a PPD and/or chest x-ray within 48 hours.
- Immunocompromised staff/volunteers need TB screening by symptom review and chest x-ray since TB skin testing may be falsely negative for these people. They also need informed counseling of potential risk of acquiring TB on the job due to their medical condition.

* Please see the Seattle-King County TB Control Guidelines for Homeless Service Agencies for more information about procedures related to TB control.

STAFF TRAINING

Adequate staff training is an important line of defense against illness and injury in shelter settings. Therefore shelters should have a training plan that includes the following topics:

- Basic shelter-oriented First Aid
- CPR
- Working with difficult clients
- Communicable disease control – Including tuberculosis and blood-borne pathogens (Hepatitis B, C, and HIV/AIDS)
- Safe Food Handling
- Fire safety
- Disaster preparedness

Resources

General Resources

Health Care for the Homeless Information Resource Center
<http://www.bphc.hrsa.gov/hchirc/>

National Health Care for the Homeless Council & Clinician's Network <http://www.nhchc.org/>
Health Care for the Homeless "Mobilizer": A free email publication to help you can stay current on national policy developments affecting homelessness and health care.
Subscribe or view back issues at <http://www.nhchc.org/mobilizer.html>

Public Health – Seattle & King County: Health Care for the Homeless Network
<http://www.metrokc.gov/health/hchn/index.htm>

Communicable Disease Control: Hand Washing

Center for Disease Control: Hand Washing Information
<http://www.cdc.gov/ncidod/op/handwashing.htm>

Public Health – Seattle & King County: Hand washing & cover your cough posters
<http://www.metrokc.gov/health/stopgerms/>

Communicable Disease Control: Food Handling

Public Health - Seattle & King County Food Protection Program
<http://www.metrokc.gov/health/foodsfty/>

WA Department of Health Food Safety Program
<http://www.doh.wa.gov/ehp/sf/food/food.htm>
<http://www.doh.wa.gov/ehp/sf/food/FoodRuleMain.htm> (Food Code & May 2005 changes)
WA Food Code for donated foods:
<http://www.leg.wa.gov/WAC/index.cfm?section=246-215-151&fuseaction=section> or
<http://www.doh.wa.gov/ehp/sf/Pubs/FoodRule/food-donations-guidelines-1204.doc>

Environmental Safety: Injury Prevention

American Red Cross: Anatomy of a First Aid Kit
<http://www.redcross.org/services/hss/lifeline/fakit.html>

Emergency Preparedness: A Manual for Homeless Service Providers
UMASS John W McCormack Graduate School of Policy Studies - The Center for Social Policy
<http://www.mccormack.umb.edu/csp/publications/EmergencyPreparedness.pdf>

Public Health - Seattle & King County:
AIDS/HIV Program: Safe, Legal, and Free Disposal of Sharps
<http://www.metrokc.gov/health/apu/resources/disposal.htm>

Recommended Shelter Health and Safety Best Practice Guidelines – July 2005
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Disaster Preparedness: Key topics, tips and fact sheets

<http://www.metrokc.gov/health/disaster/>

Smart Kids! Safe Kids! Injury Prevention Program

<http://www.metrokc.gov/health/ems/smartkids.htm>

Violence & Injury Prevention Unit: Fall Prevention for the Elderly

<http://www.metrokc.gov/health/ems/fallprevention.htm>

US Consumer Product Safety Commission: Childproofing Your Home

<http://www.cpsc.gov/cpscpub/pubs/grand/12steps/12steps.html>

Environmental Safety: Burn Prevention

Seattle Fire Department:

Fire Drill Planning FAQ <http://www.seattle.gov/fire/pubEd/business/evacuationFAQ.htm>

Fire Extinguishers Fact Sheet <http://www.seattle.gov/fire/pubEd/brochures/extinguishers.pdf>

Fire Fact Sheets <http://www.seattle.gov/fire/pubEd/brochures/brochures.htm>

Seattle Fire Code <http://www.seattle.gov/fire/FMO/firecode/firecode.htm>

Smoke Alarms <http://www.seattle.gov/fire/pubEd/smokealarms/smokeAlarms.htm>

Environmental Safety: Sanitation and Hygiene

Public Health - Seattle & King County:

Drinking Water Program <http://www.metrokc.gov/health/water/index.htm>

Public Health Webpage Directory – Pest control links

<http://www.metrokc.gov/HEALTH/portal/pests.htm>

Toxic Hazards – Indoor air quality <http://www.metrokc.gov/health/hazard/indoorair.htm>

WA Department of Health Division of Environmental Health - Office of Drinking Water

<http://www.doh.wa.gov/ehp/dw/>

Client Health: Communicable Disease Symptom Identification and Referral

Boston Health Care for the Homeless Program & National Health Care for the Homeless Council: O'Connell, J. (Ed). The Health Care of Homeless Persons: A Manual of Communicable Diseases & Common Problems in Shelters & on the Streets. June 2004. Available for \$15 at <http://www.nhchc.org/publications.html>

Health Care for the Homeless Clinicians Network - Healing Hands February 2005 Issue "Bugs that Bite: Helping Homeless Patients and Shelter Staff Cope". Deals with lice, scabies, bedbugs, and more. <http://www.nhchc.org/Network/HealingHands/2005/Feb2005HealingHands.pdf>

National Tuberculosis Center: Shelters and TB: What Staff Need to Know (18-minute training video about how to prevent the spread of TB in homeless shelters). Order or view online at: http://www.nationaltbcenter.edu/products/product_details.cfm?productID=EDP-11

Public Health - Seattle & King County:

Alcohol and Other Drug Prevention (AODP) – Inpatient and outpatient treatment and communities <http://www.metrokc.gov/HEALTH/atodp/treatment.htm>

Health Care for the Homeless Network – About homelessness and health <http://www.metrokc.gov/HEALTH/hchn/homelessness.htm>

Health Care for the Homeless Network – Health care resources for people experiencing homelessness <http://www.metrokc.gov/HEALTH/hchn/healthcare.htm>

Health Care for the Homeless Network - Training & technical assistance for homeless programs <http://www.metrokc.gov/HEALTH/hchn/training.htm>

Tuberculosis Prevention and Control Guidelines for Homeless Service Agencies in Seattle-King County, Washington <http://www.metrokc.gov/health/tb/tbguidelines.pdf>

Staff Health

Public Health - Seattle & King County:

Communicable Diseases and Epidemiology – Hepatitis B Fact Sheet <http://www.metrokc.gov/HEALTH/prevcont/hepbfactsheet.htm>

Communicable Diseases and Epidemiology - Measles (Rubeola) in adults <http://www.metrokc.gov/HEALTH/prevcont/measlesadults.htm>

Communicable Diseases and Epidemiology – Tetanus fact sheet <http://www.metrokc.gov/HEALTH/prevcont/tetanus.htm>

Immunization Program – Fact sheets and where to get immunizations <http://www.metrokc.gov/HEALTH/immunization/>

Immunization Program – Flu Season <http://www.metrokc.gov/HEALTH/immunization/fluseason.htm>

Immunization Program – Occupational immunizations <http://www.metrokc.gov/HEALTH/immunization/occupation.htm>

Staff Training

American Red Cross – King & Kitsap Counties:

Class Calendar <http://www.seattlredcross.org/health/classes/calendar.asp>

Class Descriptions <http://www.seattlredcross.org/health/GetTrained/descriptions.htm>

National Health Care for the Homeless Council: Training and Education

<http://www.nhchc.org/training.html>

Public Health - Seattle & King County:

Food Protection Program: How to get your Food Worker Permit <http://www.metrokc.gov/health/foodsfty/foodhandlerscard.htm>

Health Care for the Homeless Network: Training & technical assistance for homeless programs <http://www.metrokc.gov/health/hchn/training.htm>

Seattle Fire Department:

Medic II Program: Free CPR Classes <http://www.cityofseattle.net/fire/medics/medicTwo.htm>

Workplace Fire Safety Training Videos Fact Sheet <http://www.ci.seattle.wa.us/fire/pubEd/brochures/training%20videos.pdf>

Recommended Shelter Health and Safety Best Practice Guidelines – July 2005
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Sample Policy:
Standard Precautions in the Shelter Setting

TITLE: Standard Precautions as it Relates to Infection Control

SCOPE: Homeless shelter staff and volunteers who may possibly face contact with bodily fluids or other potentially infectious materials as a result of performing their job duties.

PURPOSE: To provide guidelines to agency management, staff, and volunteers regarding the use of Standard Precautions to minimize the risk of employees and volunteers coming in contact with bodily fluids which may contain blood-borne pathogens as well as other infectious agents.

RESPONSIBILITIES

Agencies shall:

1. Provide opportunity for the staff to be trained in the control of infectious diseases (including blood borne pathogens) as it pertains to the shelter setting. Agencies may contact Health Care for the Homeless at (206) 296-5091 to arrange training free of charge.
2. Make every attempt to achieve levels of practice as outlined in the Basic Shelter Health and Safety Standards, Staff Health Policy, and other applicable Health and Safety Policies recommended by Public Health - Seattle & King County.
3. Provide all equipment needed to achieve appropriate hand washing (*hot and cold running water, soap, paper towels*). This equipment should be accessible to employees at all times.
4. Provide employees with reasonable access to *personal protective apparel* such as *latex gloves (nitrile gloves must be made available in all situations for employees with sensitivity to latex), goggles, protective gowns, and CPR shields*.
5. Have a plan in place for post-exposure to potentially infectious materials and employees will be trained in its use.
6. Outline basic procedures for all employee duties that may involve contact with bodily fluids or other potentially infectious materials. Such duties include but are not limited to: providing assistance with personal hygiene, handling soiled laundry, providing assistance to a sick client, providing first aid, providing CPR, and cleaning up after spillage of bodily fluids. In all such cases the agency will mandate a Standard Precautions approach, which is simply an infection control approach that treats all body fluids as potentially infectious. The agency may consult with a Health Care for the Homeless Public Health Nurse for assistance with outlining these duties (206) 296-5091.

Employees Shall:

1. Agree to follow the procedures regarding duties which may involve contact with bodily fluids and other potentially infectious materials.
2. Immediately report any significant exposure incident to the supervisor. Contact of the employee's non-intact skin (chapped, cracked, scratched or otherwise open), eye, or mucous membrane with blood or other potentially infectious material is a significant exposure.

Duties Which May Expose Employees in the Shelter Setting to Potentially Infectious Materials

First Aid and CPR:

Employees who are trained in First Aid and CPR may elect to assist clients needing these interventions. The agency should provide equipment to reduce the risk of infection while rendering such aid. Equipment that should be available and accessible to the employees includes:

- *Latex gloves*
- *CPR masks*
- *disposable or cotton gowns that tie in the back*
- *safety goggles*
- *clean-up materials**

Assessment of wounds, skin conditions, scalp or hair problems:

Clients may ask staff to examine wounds, cuts, burns, injuries, skin conditions, or to check for the presence of lice or scabies. Staff should don *latex gloves* when asked to do any type of examination beyond visual. The agency should make *latex gloves* available for such occasions.

Assisting with personal hygiene or toileting:

Clients may request assistance by staff with hygiene (dental care, care of dentures or oral prostheses, assistance with bathing or cleaning up after a bowel movement or urination, changing diapers, cleaning up spill of menstrual fluid, assistance with removal of head lice or lice eggs, etc.) The agency should supply *latex gloves* for such purposes, and staff should be able to use *gowns* if they feel they need greater protection. *Diaper changing areas* should be equipped with *a lined trash can, spray bottle of bleach solution, protective covering (such as old computer paper), paper towels, and gloves.*

Assisting a sick client:

Clients who are vomiting, drooling, sweating profusely, or being incontinent of stool or urine may request assistance with cleaning up or changing clothes. The agency should provide *latex gloves, reusable or disposable gowns* and appropriate *supplies for cleaning the environment* as needed (mop, bleach, bucket, paper towels, etc.)

Assisting Clients Who Have Soiled Bedding or Laundry:

Refer to the sample policy on “Laundry” for details. As much as possible, have the client handle their own clothing and bedding. Wear *gloves* and a *gown* when handling soiled laundry. Encourage the client to discard any heavily soiled laundry. Heavily soiled linens should also be discarded or laundered separately and bleached.

** For information on supplies for cleaning the environment after contamination with bodily fluids (including vomit, excrement, urine, blood, saliva, mucous) please refer to the sample policy on “Blood/Bodily Fluids Clean-up Protocol”*

**Sample Policy:
Blood/Bodily Fluid Exposure**

The following information should be provided to the employee's health care provider or the Emergency Room MD immediately after any incidence of significant body fluid exposure by needle stick or contact with mucous membrane or non-intact skin.

Date and time of exposure:

What job duty was the employee performing at the time of exposure?

What sort of bodily fluid was the employee exposed to?

How much of the fluid did the employee come in contact with?

What part of the employee's body was exposed to the fluid?

How long did the employee remain in contact with the bodily fluid?

Did the employee have any breaks in the portion of their skin that contacted the bodily fluid?

In the case of a needle stick or other sharp object injury, how deeply did the needle or object penetrate, and was fluid injected into the employee?

Was the source material known to contain HIV or hepatitis B or C? (the source can be asked to voluntarily provide this information, and to volunteer to be tested for these conditions)

**Sample Policy:
Blood/Bodily Fluids Clean-Up Protocol**

When you provide First Aid or when you clean an area or handle any items soiled with blood or bodily fluids (urine, vomit, blood, feces, semen) please take precautions to protect yourself and others from infection. Always follow these simple steps when you clean up after blood/body fluids spills:

Equipment:

- Paper towels
- Plastic garbage bags
- Kitty litter (for big spills)
- Disinfectant (bleach 1:10 dilution)
- Mop & mop bucket
- Spray bottle

Protective apparel:

- Latex gloves
- Eye/face protection (plastic goggles)
- Protective gowns or aprons

Policy/Procedures:

Spill clean-up materials are located _____
along with a copy of this document.

- 1) Put on **protective gear**. If it is possible that blood or bodily fluids may spray or splatter, wear **protective eye covering (plastic goggles)**. Put on **latex gloves**. If there is a possibility that your clothing may become soiled, put on a **protective gown** (as when handling laundry or soiled clothing). Keep the scene clear of people.
- 2) Get a **bucket or spray bottle, bleach, and paper towels or a mop** to clean the floor and other areas. If the area is large, put $\frac{1}{4}$ cup **bleach** in a gallon of **cool water** (hot water destroys the bleach). Spray the area with this solution. If the area to be cleaned is small, you can make a solution of bleach and cool water in a **quart spray bottle**. Use 1 teaspoon of bleach per quart. This bleach solution must be discarded after 24 hours. It is recommended that a fresh solution be mixed up every time it is needed.
- 3) Blot up as much of the spill and the bleach solution as possible with **paper towels**. If there is a large volume spills or vomit, use **kitty litter** to absorb. Dispose of these materials in a **plastic garbage bag**.
- 4) If you used a **mop**, rinse the mop in **bleach solution** and allow to dry. Dump the leftover solution down the drain or toilet. **DO NOT** use a sink that is normally used for food preparation.
- 5) Pick up any soiled debris (clothing, bedding, towels, or bandages) and place in a **garbage bag**. If you are finished cleaning, remove your protective gear and gloves and put them in the garbage bag. Tie off the garbage bag and place it in the regular trash. Only very large spills need to be placed in special biohazard bags and disposed of by an approved facility.
- 6) Wash your hands thoroughly. Re-stock the **clean-up kit**. If you have had significant exposure to bodily fluid (needle stick or contact with mucous membrane or non-intact skin) contact a supervisor **immediately** and follow the sample policy for "**blood/bodily fluid exposure**".

Sample Policy:
Laundry Hygiene in the Shelter Setting

TITLE: Laundry Procedures as it Relates to Infection Control.

SCOPE: Shelter staff, volunteers, and clients.

PURPOSE: To provide guidelines to staff, volunteers and residents who handle linens and laundry in a safe and effective manner to reduce the risk of spread of infectious diseases.

BACKGROUND INFORMATION:

For the purpose of this policy, all linens and personal laundry of clients should be considered contaminated and should be treated carefully to avoid spread of infectious disease. Scabies, lice, and other bacterial pathogens (staphylococcal and streptococcal bacteria) are difficult or impossible to see. Laundry should be handled as little as possible. If possible, clients should handle their own laundry.

POLICY/PROCEDURE:

I. General Practices

- Staff should wear *gloves* when in contact with any used or worn laundry items, whether obvious contamination is visible or not.
- *Gowns or aprons* should be worn whenever it is likely that a staff person's clothing could come in contact with laundry.

II. Laundry Washed by Shelter Staff on Premises

- Use a hot wash cycle (at least 105-110 F for 10 minutes) followed by thorough drying in a hot dryer (160 F). This process is sufficient to decontaminate laundry. No other additives such as bleach are necessary to sanitize laundry, unless stain removal is desired.
- Any kitchen laundry or other items used by staff (towels, aprons, etc) should be washed and dried in the above manner.
- Staff/agency laundry should be washed in batches separate from client bedding and clothing.
- If linens are heavily soiled with feces, large amounts of solid material should be disposed of in a toilet. Handling of feces should be avoided whenever possible. If rinsing is required, staff should take care to minimize handling and avoid splashing.
- If possible clients should be asked to rinse their own linens when they are soiled.
- Wet linens should be stored in a *plastic bag* while awaiting final wash to avoid any leaking and reduce odor.
- Dispose of linens if soiling is severe.

III. Laundry Supplied by a Laundry Service

- Linen awaiting pick up by a laundry service should be stored in a ***contained bin or bag*** so that laundry cannot come in contact with clients, staff, the floor, or other clean items.
- Wet bedding should be placed in a ***plastic bag*** inside the bin so that leaking cannot occur.
- Only large amounts of feces that can be easily removed should be disposed of in the toilet. No further rinsing or handling should be done by shelter staff.

IV. Bedding Stored for Returning Clients

- Used linen may not be transferred to a different client.
- Used bedding should be stored such that the bedding of different clients is not touching it. This will prevent cross contamination.

V. Supplies and Equipment

- Shelters should maintain ***washers and dryers*** in good working order or should contract with a Laundry Service for routine delivery and pick-up.
- If laundry is done on site, the water temperatures should be at least 105-110 F.
- Shelters should supply ***gloves, gowns or aprons, laundry detergent, plastic bags, and plastic laundry baskets or laundry bins.***

**Sample Policy:
Scabies Policies & Procedures**

TITLE:

Prevention and Management of Scabies Infestation at Homeless Shelters and Drop-in Centers.

SCOPE: Shelter and center staff, volunteers, and clients.

PURPOSE: To provide guidance to shelter and center staff in the prevention, identification, and management of scabies infestations in shelter clients, staff, and/or volunteers.

BACKGROUND INFORMATION:

Scabies is a skin infestation caused by a tiny insect called the “itch mite.” The scabies mites are about the size of the period at the end of this sentence. They live most of their life cycle burrowed under the skin of human beings.

The most common signs and symptoms of scabies include **severe itching and a rash**. The rash may look like red and/or crusted sores, and there may be a lot of scratch marks from itching. On some people, scaly linear “burrows” are visible where the scabies mite has actually burrowed under the skin. Symptoms usually take 2-4 weeks to develop after a contact with an infected person. Itching begins gradually over the course of several days and is often worse at night.

The rash in adults usually appears in the following places:

- between the fingers and toes
- around the belt line or naval
- in skin folds such as under the breasts, armpits, buttocks or in the groin area
- backs of knees, inner elbows, ankles, and wrists

In young children and persons with certain chronic illnesses, the rash may appear on the face or scalp and on the palms of the hands and soles of the feet.

There is a severe form of infestation known as Crusted or Norwegian scabies. It is rare, but is occasionally seen in persons with suppressed immune systems, such as persons with AIDS or other chronic illnesses. Crusted scabies appears as a scaly or flaky rash which is often white to yellowish in appearance. In many cases the client does not feel itchy despite a severe infestation. Crusted scabies is extremely contagious and difficult to treat.

The two most commonly used medications for scabies are Kwell (lindane) and Elimate. Both medications are supplied as a lotion which is applied to the entire body from the neck down. Kwell is a neuro-toxic drug which can cause neurologic problems such as seizures if used improperly. It should be used with extreme caution in people who are pregnant, nursing, or under two years of age. It is a prescription drug and should only be used by the person for whom it was

prescribed. A drug called Eurax (Crotamiton) may be prescribed for people who cannot use Kwell or Elimate. Severe cases may be treated with an oral medication in addition to the topical lotions.

Prompt and thorough treatment is essential for cure of the infestation and control of spread. In addition to treatment of a person with scabies, clothing and bedding should also be carefully laundered or isolated to prevent the re-infection or spread of the infestation.

Scabies is contagious. However, it is spread only through close or direct contact with an infected person or that person's clothing or bedding. You cannot get scabies by talking to someone with scabies, or simply by being in the same room with that person. Scabies is usually spread between family members or sexual contacts. It is most common in crowded environments including homeless shelters. Scabies can be spread among homeless persons by sleeping close to each other or by sharing clothing. Contact with infested laundry is the most likely route of transmission for shelter staff. Scabies is easily killed by carefully following the instructions outlined in this policy.

POLICY:

- All shelter staff, volunteers, and clients should utilize infection control practices, as outlined in the Health and Safety Best Practice Guidelines for Shelters (available from Health Care for the Homeless Network, 206-296-4656) so that scabies infestations will be prevented whenever possible.
- Actual or suspected cases should be identified and controlled in a timely, effective, and humane manner as is possible.
- The spread of scabies between clients, staff and volunteers should be minimized.
- Shelter and center managers are encouraged to call the Public Health Nurse Consultant at 206-296-4656 for advice and support regarding scabies or any health and safety concern.

PROCEDURE:

1. Intake Screening

Staff should observe clients for symptoms of scabies such as severe itching (which may worsen at night) and/or a red or crusted rash or evidence of scratch marks due to severe scratching.

If a client has such a rash, they should be referred for medical evaluation as soon as possible:

- A client with known or suspected scabies may stay the night at the shelter. In order to stay additional nights at the shelter, the client must demonstrate that he/she has been seen by a health care provider and that treatment, if prescribed, has been completed. Drop-in centers should encourage clients to seek care immediately.
- Treatment may be performed at the shelter so that staff can assist the client and assure adequate and safe treatment.
- If a client is known or strongly suspected to have Norwegian or Crusted scabies, that client should be referred immediately for medical evaluation. Shelter staff should advocate that the client be treated in a hospital facility where adequate isolation practices can be used, and that they not return to the shelter until treatment has been completed.

II. Treatment

If a client has been instructed by his/her medical provider to treat for scabies, shelter staff are encouraged to assist the client in completing the treatment. The following guidelines should be used along with any instructions on the medication label to assisting the client and assuring adequate treatment.

A. Application of Treatment

- Staff should explain the entire procedure to the client including the skin treatment and the need to launder or isolate clothing and bedding.
- The client should shower or bathe and then allow the skin to thoroughly cool for at least 30 minutes prior to applying the lotion.
- The client should gently massage the medication into the skin according to package or provider instructions. The most commonly prescribed medications are Lindane or Elimite lotion. The lotion should be applied from the neck down and behind the ears unless otherwise stated on the directions. Open sores should be avoided. A small amount can cover a sizable area. For most people 1 ounce of lotion is enough. Do not over apply.
- Staff should remind the client to thoroughly apply the lotion, especially to web spaces between fingers and toes and in between all skin folds. Extra attention should be given to any area where a rash is present.
- Scabies mites can hide under the fingernails. Clients should be instructed to clip their fingernails short to prevent re-infection. Lotion can be applied under the nails with a blunt toothpick or brushed on with a nail brush.
- If any skin areas are washed during the treatment, the lotion should be reapplied.
- Staff may assist if clients need physical assistance applying the lotion in hard to reach areas.
- **Gloves** should always be worn by staff when contacting client's skin and/or scabies lotions.
- Staff should not assist clients who are mentally confused and cannot understand or participate in the prescribed treatment. Such clients should be assisted by an RN or medical provider.

B. Completion of Treatment and Follow-up

- If possible, the client should shower/bathe 8-12 hours after applying the treatment to remove all lotion from the skin. (If necessary, this step can be skipped without risk to the client).
- After showering, the client should put on **freshly laundered clothing** or clothes that have not been worn for 72 hours. This includes shoes, outer coats, hats, and gloves.
- After showering, the client should be issued **fresh bedding** and their mat should be wiped down with a **standard disinfection bleach solution** (1 tsp bleach per quart of cool water).
- Generally one treatment as described above is sufficient to cure scabies. However, a medical provider may occasionally prescribe a second treatment to be completed 7-10 days after the initial treatment. Clients may need assistance and/or a reminder for the second treatment.
- Continued itching does not mean the treatment failed. It can take as long as two weeks for scabies symptoms to completely go away after treatment, however itching should decrease at least partially after 2 days. If a client continues to have severe itching several days after treatment, or if the rash appears to worsen after treatment, the client should be referred back for follow-up medical evaluation. It is possible that a client may be having a reaction to the medication. The medical provider may prescribe medication to help alleviate the itching.

C. Treatment of Bedding and Linens

- Clients should be issued *clean bedding* to use the night following the application of the treatment. The mat should be wiped down with a *standard bleach disinfection solution*.
- A *second fresh set of bedding* should be issued after the treatment is washed off.
- Bedding used by a client with scabies should be laundered according to the laundry procedures described below.

D. Treatment of Clients Clothing

Clothing worn by the infected client within the last 72 hours should be considered contaminated. This includes shoes, overcoats, hats, gloves. The newly treated client should not wear contaminated clothing until it has been treated in the following manner.

- Clothing can be laundered using a hot wash cycle followed by thorough drying in hot dryer (20 minutes on 160 F, the “high” or “cotton” setting)
- If laundering is not possible, contaminated clothing must be isolated for 72 hours before the treated client may wear the clothing again. Clothing can be isolated simply by placing the items in a sealed *plastic bag* for 3 days.
- Shelter staff should assist the client in finding *replacement clothing* as necessary.

III. Prevention of an Outbreak Situation

An outbreak is defined as the simultaneous infection of multiple clients and or staff with an infectious disease. If questions arise beyond the scope of this policy related to an outbreak situation, the On-Site RN or Shelter Manager should call the Public Health Nurse Consultant at the Health Care for the Homeless Network for specific guidance (206-296-4656).

A. Contacts

Any client who is known to have scabies should be asked to notify any sexual partners, close family members, or persons with whom the client may have slept or shared clothing. These persons should be told of the risk for scabies and referred for medical evaluation if any are having symptoms. Explain to the client that they can easily be re-infested if they continue to have direct contact with untreated family members or sexual contacts. Immunity to scabies does not develop after infection.

B. General Guidelines for Prevention of the Spread of Scabies

Scabies mites cannot live away from the human body for very long, however scabies is occasionally spread through contact with recently used/worn clothing or bedding. It is generally recommended that staff and clients take a Standard Precautions approach as outlined in the Health and Safety Best Practice Guidelines for Shelters (available from the Public Health Nurse Consultant at 296-5091). The maintenance of a clean environment and the practice of infection control standards will prevent or minimize the spread of infectious diseases such as scabies.

Any client could potentially be infested and not yet be symptomatic. For this reason the following cleaning and laundry practices should be followed *at all times* regardless of whether or not there are known cases of scabies in the shelter:

- If possible, all chairs and couches should be *plastic or vinyl covered* so that they can be wiped down daily with a *standard disinfectant*.

- Carpeted floors should be vacuumed thoroughly and daily. Seal used *vacuum bags* in a *plastic bag* and disposed of immediately. Linoleum/vinyl/wood floors are preferable.
- All laundry done at the shelter should be considered potentially contaminated and should be laundered in a hot wash cycle (105-120 F) with normal *detergent* and then thoroughly dried in a hot dryer (at least 30 minutes at 160 F). Do not overload washers or driers.
- All staff should wear a *disposable gown/apron and gloves* when in contact with dirty laundry.
- Bedding awaiting laundering should be stored in a separate container (*plastic bag, bin, or laundry cart*) so that it cannot come in contact with clean bedding, clothing or people.
- Bedding that is being held for use by any returning client will be stored in a separate plastic bag or container so that each client's bedding is always isolated.
- Laundry additives such as bleach are not necessary to kill scabies.
- Mattresses should be covered with a *washable cover* and should be wiped thoroughly with a *disinfectant cleaner* before use by any other clients.
- Clients should not sleep so close together that they can touch each other while sleeping. Intake procedure should include gathering information about symptoms (i.e. "Do you have a rash or area that is itchy?") Clients who are scratching themselves frequently should be taken aside and asked about symptoms and referred for evaluation.

C. Dress Code

- All persons (clients and staff) should wear shoes at all times.
- All persons should wear clothes that cover the thighs (no short shorts or mini skirts) so that there will be a clothing barrier when sitting in a chair.

IV. Symptomatic Staff

Staff who experience itching, should first of all, relax. The idea of scabies makes most of us start to itch, but a true infestation will present the usual symptoms. It is helpful to remember that:

- Symptoms usually take 2-4 weeks to develop
- Itching begins gradually. It is severe and worsens at night
- Scabies rash is usually found in typical places (see background section)
- Staff who experience significant symptoms of scabies should consult the on-site RN or their primary care provider and notify the provider that they may have had a contact with scabies.
- Staff who do not have health insurance can file an L&I claim to cover the cost of the visit.
- Staff are discouraged from self-treating without advice from a health care provider and are prohibited from sharing scabies lotions with any client.

V. Education

- Shelter staff should be trained in the above described procedures at the time of hire and should receive refresher training on a regular basis.
- Clients should receive verbal and written information regarding the prevention and identification of scabies including the following recommendations:
 - Avoid sharing clothing and bedding.
 - Avoid sleeping so close to another person that you are touching that person.
 - Avoid direct contact with persons that itch.
 - If you have an itchy rash or burrows on the skin, seek medical treatment and notify shelter staff immediately.

**Sample Policy:
Lice Policies & Procedures**

TITLE: Prevention and Management of Lice Infestation in settings that serve homeless clients.

SCOPE: Shelter and center staff, volunteers, and clients.

PURPOSE: To provide guidance to shelter staff in the prevention, identification and management of lice infestations in shelter clients and/or staff and volunteers.

BACKGROUND INFORMATION

Types of lice:

- There are 3 types of lice found on humans: *Head lice* (known as pediculosis) are about 3mm long, *body lice* are about 2 mm long, *pubic lice* (also known as “crabs”) are about 2mm long and rounder in shape.
- Lice are wingless insects that live by sucking human blood. Adult lice can only live 2-3 days independent of humans. There are some claims that un-hatched nits can survive away from the host and hatch under certain conditions, however this is unlikely. Hatched nits (nymphs) must find a blood meal as soon as possible or they die before becoming full-fledged lice.
- The female louse lays eggs called *nits*. She can lay about 100 in her brief 30 day lifespan. Nits are about 1mm long ovals visible with the naked eye. Empty (hatched) nits are white or translucent. Un-hatched nits are brownish and hard to see. *Head lice nits* cement firmly to the hair shaft ¼ inch from the scalp or closer. *Body lice nits* are generally found along seam lines in clothing. *Pubic lice nits* can be found in pubic and body hair.

Symptoms of lice infestation:

- Intense itching in the infested area and irritability. Itchiness may not present as a symptom until infestation is established, about 2 weeks after lice first “move in”. Itchiness is believed to be caused by an allergic reaction to the louse’s saliva.
- Redness from scratching may be visible. Scratching can lead to secondary infections, such as staph infection.

Transmission of Lice

- Lice do not jump or fly, they can only be spread through direct physical contact with an infested person or through sharing of personal items such as hats, combs, clothing, pillows, towels, blankets, or bedding.
- *Head lice* are common in child care settings and schools. Head lice are not associated with poor hygiene as head lice like clean hair. Since children play close to one another lice can travel from child to child directly or via shared clothing, hats, combs, or brushes. Children may also bring lice home to other family members.
- *Body lice* are usually seen in adults who have limited access to hygiene facilities, and can be common in places such as shelters where conditions are crowded and clients might share personal items. Body lice travel from person to person via by direct contact or via shared clothing, bedding, and towels.
- *Crab lice* are spread sexually or via bedding and towels

POLICY:

Infection control practices should be utilized by staff, volunteers and clients of the Shelter so that lice infestations will be prevented whenever possible. Actual or suspected cases should be identified and controlled in as timely, effective, and humane a manner as possible. The spread of lice between clients, staff, and volunteers should be minimized.

PROCEDURE:

1. Intake Screening

- Upon entering the shelter, staff should discretely ask each client if they have symptoms of lice, such as itching in the head, trunk, or groin area. Assure the client that they will not be excluded from shelter or services by answering affirmatively.
- If a client complains of or is observed to have such symptoms, or if they report having had recent contact with a person diagnosed with lice, they should be referred for medical evaluation as soon as possible.
- A staff person trained to assist clients with head lice may examine the client for the presence of nits or head lice on hair follicles. Staff should wear *latex gloves* when examining a client.
- A client with known or suspected lice may stay one night at the shelter. In order to stay additional nights, the client must show a note from a medical provider indicating that they have been evaluated, and that treatment, if prescribed, has been initiated (see sample form).
- A client known or strongly suspected to have a lice infestation should be isolated as best as possible. The laundry/bedding of that client should be handled with *gloves* and not allowed to come in contact with staff hair or clothes.
- If the shelter has facilities for bathing and laundry and if the staff is trained, treatment may be performed at the shelter so that staff can assist the client and assure adequate safe treatment.
- See treatment guidelines for the 3 types of lice infestations below.

II. Diagnosis

The presence of live adult lice or viable nits is diagnostic of lice infestation:

- **Head lice** nits are typically found behind the ears and along the back of the head, however the entire scalp should be examined. Un-hatched nits are found on the hair shaft close to the scalp. Some nits resemble dandruff, but unlike dandruff they are very difficult to remove.
- **Body lice** rarely are found on the skin. Rather, they typically live on clothing, particularly in the seams. These lice appear as bugs the size of sesame seeds, with a gray-white color.
- **Pubic or crab lice** are found as nits on pubic hair, eyebrows, eyelashes, or underarm hair. Crab lice often leave a bluish stain under the skin around the chest, thighs, or abdomen.
- The skin in the affected areas of all 3 types of lice often appears reddened or scratched.

III. Treatment of Head Lice

If a client has been instructed by their medical provider to treat for lice, shelter staff who have received training in lice treatment may assist the client in completing their treatment. The following guidelines pertain to the use of Nix™ for the treatment of head lice and *should be used along with any instructions on the medication label to assure client safety*. If any other medication has been prescribed, staff should follow label instructions for procedure.

[Note: For the treatment of *body lice* and *pubic lice*, refer to those sections below AND TO SPECIFIC INSTRUCTIONS FROM THE PROVIDER]

A. Treatment of the Client with Head Lice

- Staff should explain the entire procedure to the client. This includes the skin treatment and the need to launder or isolate clothing, bedding, and other personal items (brushes, combs...)
- There should be a clearly communicated expectation that the client will cooperate and will follow these instructions explicitly.
- Lice are best removed by using a combination of manual combing and lice treatments.
- Both insecticidal and non-chemical treatments are available over the counter.
- The most important step of treatment is thorough and frequent combing of the hair for at least 14 days to remove lice and nits.

B. Step-by-Step Treatment Procedure for treatment and removal of head lice

- Allow yourself enough time to do a good job. It may take as long as an hour if the hair is long and thick. Work in good light.
- Apply one of the *lice treatments* as described below.
- Be sure to use an effective *nit-removal comb* such as *Licemeister®* or *LiceOut®*.
- Place a *towel* between the hair and shoulders of the person who has head lice.
- Part the hair into four sections and pin the hair with clips to prepare it for combing.
- Starting with one section. Select a small area of the section that is about 1 inch square. Start at the scalp and pull the comb all the way through to the end of the strands of hair.
- If nits remain attached to the hair shaft, comb through the hair strands again.
- After each comb-through, dip the lice comb in *hot water* and wipe it with a *paper towel*.
- Continue combing until all sections are done.
- Wash the towel and clothes that the person wore during the combing as described below.
- Wash the comb in *extra-hot (128° F) soapy water* for at least 10 minutes.
- Wash hands completely when done.

C. What chemical-free treatments are recommended?

Chemical-free treatments can be used as often as needed. They do not kill lice or nits. Rather, they slow down the lice and make them easier to comb out. These treatments include coating the hair with *HairClean 1-2-3®* or with a water-based product such as *LiceOut®* (follow instructions on the box):

1. Apply thickly to hair.
2. Cover hair with *disposable shower cap* and leave in place for at least 30 minutes.
3. Follow instructions for lice and nit removal using an *effective lice comb*.
4. Do not use these treatments at the same time the chemical treatment is used.

D. About chemical treatment: Nix®

Although Nix® is the most effective of the chemical treatments, it will not kill lice that have become resistant. Nix® can be purchased without a prescription.

1. Wash the hair with a mild shampoo (such as baby shampoo) that contains *no conditioner*.
2. Apply *Nix®* following the instructions on the box.
3. Comb the hair with a *clean lice comb* to remove the nits. Dry hair as usual.
4. Repeat Nix® treatment in 7 days.

REMEMBER: Since lice may be resistant to Nix[®] and other pesticides, *you must perform daily nit combing for 14 days after using these products to assure complete removal of lice and nits.*

E. Cautions when using Nix[®]

- **Do not use** Nix[®] when open sores are present.
- **Do not use** Nix[®] on children who are less than 2 months of age.
- Pregnant/breastfeeding women should consult their health care provider before using Nix[®].
- **Never** mix Nix[®] with other lice treatments.
- **Do not use** any other creme rinse, shampoo containing creme rinse, hair spray, mousse, gel, mayonnaise, or vinegar on the hair for at least 1 week *after* using Nix[®], because they may weaken the action of Nix[®].
- Chlorine in pool water may also deactivate Nix[®] leading to some treatment failures.
- **Never** use Nix[®] on eyebrows or eyelashes. Instead, apply petrolatum jelly for a few days and pluck off nits with fingers.
- **Never** use Nix[®] more often than recommended. It is an insecticide and can be poisonous if used improperly.

F. Additional Lice Treatment Procedures

In addition to the steps listed above, the following actions may help control the spread or re-infestation of head lice in a household:

- Check other household members for lice. Those who have lice should be treated. Do not treat someone if you do not see lice or nits in their hair.
- Guardians should notify their child's school and child care program if their child has lice.
- Wash all combs/brushes the person used in extra-hot (128.3F) soapy water for at least 10 min
- Wash all clothing (including coats, hats, scarves...) and bedding used by the infested person in the last 2 days prior to treatment.

To wash these items, do *ONE* of the following:

- Wash in *extra-hot water* or heat dry the item at temperatures >128.3 F for at least 5 minutes.
- Dry clean the item.
- Pack non-washable items in a *sealed plastic bag* for 2 days to eliminate the risk from lice that may have been dislodged onto those items.
- Upholstered furniture, carpets, bicycle helmets, sports helmets, and upholstered car seats may be vacuumed. Change the *vacuum cleaner bag* after use, place it in a sealed plastic bag, and put the bag in the outside garbage.
- **Do not** use lice sprays! They may cause toxic or allergic reactions.

G. What to do if lice come back or the treatment fails to work

- If lice come back, it is usually because nits or newly hatched lice were not removed with the first treatments.
- Follow the combing instructions as described.
- **You may** use the *chemical-free treatments* as often as needed.
- **You may** use Nix[®] again after 7 days have passed since the last Nix[®] application.
- Regardless of which treatment you use, the most important step is to *comb* out the lice and nits completely.

H. Additional information

- National Pediculosis Association <http://www.headlice.org/>
- Centers for Disease Control <http://www.cdc.gov/ncidod/dpd/parasites/lice/>

IV. Treatment of Body Lice

A. Person

- Often the person with body lice should simply be encouraged to take a shower with soap and warm water to dislodge any lice that may be on their body.
- Sometimes providers may prescribe treatment with *Nix*[®] or other *chemical treatments* (follow provider or package directions).

B. Clothing

- Body lice live in the seams of the clothing. It is vital to thoroughly wash and dry all clothing that has been worn by the client within the last 7 days.
- Wash clothes in *hot soapy water* on the regular wash cycle.
- Dry clothing in a *dryer* for 30 minutes on the hottest setting. Do not overload the dryer.
- It may be prudent to wash all of the client's clothing if possible.
- Clothing that can't be washed can be dry cleaned or placed in sealed plastic bags for 1 week.

C. Bedding:

- Wash all bedding and linens in *hot soapy water* (105-120 F) and dry them thoroughly in a *hot dryer* (at least 30min at 160 F). Make sure the dryer is not over-loaded.
- Special laundry additives/disinfectants are not necessary to kill lice or nits.
- All staff that work with laundry should wear a protective *disposable gown/apron and gloves* to prevent direct contact with dirty linens. Staff should treat *all* linens and bedding as though they could potentially be infested, not just the linen used by someone with a known diagnosis (see Laundry Sample Policy).
- Dirty bedding that is awaiting laundering should be stored in a separate container (such as a *plastic bag or bin*) so that it cannot come in contact with clean bedding.
- Bedding that is being held for use by any returning client will be stored in a separate plastic bag or container so that client's bedding is always isolated.
- Mattresses should be covered with a *washable cover*. Mattresses or mats should be cleaned with a *disinfectant cleaner* before use by any other clients.
- Clients should be spaced so they don't come in contact with each other while sleeping.
- Clients who have backpacks and bed rolls may need assistance in determining what needs to be laundered and in accessing laundry facilities.

V. Treatment of Pubic or Crab Lice

- A health care provider should prescribe treatment.
- Assist the client in following the directions given.
- Assist with laundering clothes and bedding used by the client in the last 3 days.

VI. Notification and Treatment of Contacts

- Any client known to have body or crab lice should be asked to notify any sexual partners, close family members, or persons with whom they may have slept or shared clothing or other personal items. These persons should be told of the risk for lice transmission and referred for evaluation and treatment.
- Explain to the client that they can easily be re-infested if they continue to have direct contact with untreated family members or sexual contacts.

- Be on the look-out for other clients complaining of itching or seen scratching excessively. Inquire discretely about symptoms and refer for evaluation.

VII. Preventive Treatment of the Environment

It is generally recommended that staff and clients take a Standard Precautions approach to the maintenance of a clean environment. Consistent practice of infection control standards, as outlined in the Health and Safety Standards for Shelters, will help prevent or minimize the spread of infectious diseases and pest infestations such as lice. Any client could potentially be infested with lice and not yet be symptomatic. For this reason the following cleaning and laundry practices should be followed *at all times* regardless of whether there are known cases of lice in the shelter.

- All chairs and couches that are plastic or vinyl covered should be wiped down daily with a standard disinfectant.
- Cloth upholstered furniture should be vacuumed daily.
- Carpeted floors should be vacuumed thoroughly on a daily basis.
- All laundry done at the shelter should be considered potentially contaminated and should be laundered in a hot wash cycle (105-120 F) with normal detergent and then thoroughly dried in a hot dryer (at least 30 minutes at 160 F). Drying is the most important part of this process. ***Do not overload the dryer!***
- All staff should wear a ***disposable gown/apron and gloves*** when contacting dirty laundry.
- All staff should wear clothes that cover the thighs at all times (no short shorts or mini skirts) so that there will be a clothing barrier when sitting in a chair.
- All people in shelter should wear shoes in public areas.

VIII. Symptomatic Staff

- Staff experiencing itching should relax and not panic. The *idea* of lice makes most of us start to itch, but *a true infestation is only transmitted through direct contact with an infested person or that person's clothing.*
- Staff who experience significant symptoms of lice or who have found nits on their person should consult their primary care provider and notify the provider that they may have had exposure to lice.
- Staff who have actual lice infestations should be asked to notify their intimate contacts so that they may also be treated if necessary. This will discourage re-infestation.

IX. Education

- Shelter staff should be trained in control of communicable diseases including lice infestation.
- In the event of a lice infestation at your agency, clients should receive verbal and written information regarding the prevention and identification of lice, including the following:
 - a. ***Avoid*** sharing clothing, hats, pillows, blankets, combs, and hairbrushes.
 - b. ***Avoid*** sleeping close enough to another person that you are touching that person.
 - c. ***Avoid*** direct contact with persons that itch.
 - d. If you or someone you know has an itchy rash, or has nits, seek medical treatment immediately and follow through with the prescribed treatment.

X. Additional Handouts Available From Public Health

- **Lice Aren't Nice**
Patient information about lice and lice treatment.
- **Parent Checklist for Lice Infestation**
Checklist designed to assist parents with the management of lice treatment.
- **Staff Checklist for Lice Infestation**
Checklist designed to assist staff with the management of lice outbreaks.
- **Sample Letter**
Letter to schools and child care providers regarding lice diagnosed at shelter.
- **Sample Note**
Note to health care provider regarding shelter client suspected of having lice.
- **Shelter Health and Safety Standards**
General guidelines regarding the control of communicable diseases in shelter settings.

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Recommended Shelter Health and Safety Best Practice:

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Halpern, J.S.: *Recognition and Treatment of Pediculosis in the Emergency Department*, Journal of Emergency Nursing. 1994. April 20(2). p103-133.

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ATTACHMENT H
(Draft Human Services Resource Guide)



Shelters / Housing

Congregations for the Homeless

Indoor shelter for single adult men hosted by local faith communities
(425) 749-8369 or (206) 295-7803

Eastside Domestic Violence Program

Community Housing Program/My Sister's House
Locations are confidential; call for more information
425-746-1940

Downtown Action to Save Housing (DASH)

Owns and operates low-to-moderate income rental housing for families and older adults.
11018 NE 11th Street
425-646-9053
Distance: 0.7 miles S

The Landing

Indoor emergency shelter for young adults age 18-23.
Open 9 pm - 9 am Sunday through Thursday
Bellevue Family YMCA
14230 Bel-Red Road
(425) 869-6490
Distance: 2.7 miles E

Catholic Community Services-Harrington House

Provides transitional housing in a group setting for pregnant and newly-parenting homeless women.
15980 NE 8th Street
425-643-1434
Distance: 3.9 miles E

Shelters / Housing continued

Hopelink Transitional Housing

Operates transitional housing program for homeless families with children. Various sites
425-454-7022

Angeline's Eastside Women's Center

Safe day-time environment for homeless women
Open from 9am-3pm on weekdays.
Bellevue First Congregational Church
752-108th Ave NE, 425-452-5001
Distance: .78 miles

Sophia Way

Housing program for women only. Open 7pm - 7am.
Eastside Interfaith Social Concerns Council
752-108th Ave. NE
425-417-7575
Distance: .78 mi.



Clothing Banks

Overlake Service

League Thrift Store
167 Bellevue Square
425-451-1175
Distance: 1.3 miles S

Goodwill Industries

14515 NE 20th St.
425-649-2080
Distance: 4.6 miles E

Bellevue Seventh Day

Adventist Church
15 140th Avenue NE
(425) 746-1763
Distance: 3.2 miles SE

Shop

St. Margaret's Thrift
4228 Factoria Blvd. SE
425-641-6830
Distance: 5.5 miles S



Food Banks and Feeding Programs

Catholic Community Services - Family Center
Emergency Services - Food Vouchers
12828 Northrup Way, #100
425-284-2111
Distance: 2.9 miles E

World Impact Network

Food Bank
2015 Richards Road SE
425-643-8246
Distance: 3.4 miles SE

Hopelink

Food Bank
Emergency Feeding Svs
14812 Main Street
425-943-7555
Distance: 4.1 miles SE

YMCA - Lake Heights

Hot Meal Program
5225 119th Ave. SE
425-644-8417
Distance: 5.6 miles S

Emergency Feeding Program

Emergency Food Packs
St. Andrew's Lutheran Church
2650 148th Ave. SE
425-653-1652

Call for other distribution locations in Bellevue
Distance: 5.8 miles SE

DSHS-Community Svs

Food Benefits Program
805-156th Ave.
206-341-7404 Main
Distance: 4.39 miles

Eastgate Public Health

WIC (Women, Infants and Children Program)
14350 SE Eastgate Way
206-296-9728
Distance: 6.26 miles



Gas Stations

Chevron

2626 Bellevue Way NE
425-827-1711
Distance: 0.6 miles NW

AM PM

12903 Northrup Way
425-885-9866
Distance: 2.9 miles E

Disability Services

Eastside Employment Svs

Job Counseling, referral & placement. Serves people with developmental and learning disabilities.
1215-120th Ave NE, #101
425-453-0676
Distance: 1.36 miles SE

Elder and Adult Day Svs

Provides adult day health services for those who are in need of daytime health, social, or rehabilitative services and support for care providers.
12831 NE 21st Place
425-867-1799
Distance: 3.08 miles

Bridge Ministries

Provides one-on one con-

Mini Market

11611 NE 8th St.
425-454-9685
Distance: 1.26 miles SE

tact for persons w/physical & developmental disabilities, used medical equipment, supportive help for their families, social activities, & mobilization of church & community resources.

520 6th Street S, Kirkland
425-828-1431 main
425-828-1535 equipment
Distance: 3.65 miles

Archdiocesan Housing Authority

- Elbert House
Provides permanent housing for individuals with disabilities and older adults, ages 62 and older.
100-23rd Ave. S., Seattle
206-328-5720
Distance: 11.6 miles W



Employment



Houses of Worship

(within five miles)

Labor Ready
10620 NE 8th St.
425-688-8878
Distance: 0.8 miles S

YWCA Eastside Employment Services
16601 NE 80th Street
Redmond
425-556-1352
Distance: 7.8 miles NE

Washington State Labor & Industries Dept.

DSHS - Community Services Offices

Workers Compensation - Vocational Rehabilitation
Offers rehabilitation services to qualified injured workers.

805-156th Ave.
206-341-7404/800-662-6715
Distance: 4.3 miles E

616 120th Ave NE, #C201
425-990-1400
Distance: 1.6 miles SE

Bellevue Community College

Master Builders Care Foundation

Construction Education for Women - Women who are interested in construction trades. Some programs serve girls.

Community Career Center/
Women's Center
Worksource Affiliate Site
3000 Landersholm Circle,
Bldg. B, Room 231
425-564-2279
Distance: 6.5 miles SE

335-116th Avenue SE
425-451-7920
Distance: 1.9 miles S

Westminster Chapel Job Support Ministry

13646 NE 24th Street
425-562-8028
Distance: 3.8 miles E

First United Methodist Church
1934 108th Avenue NE
425-454-2059
Distance: 0.0 miles

Grace Lutheran Church
9625 NE 8th Street
425-454-4344
Distance: 1.5 miles SW

First Presbyterian Church
1717 Bellevue Way NE
425-454-3082
Distance: 0.3 miles SW

Living Hope Bible Church
1605 116th Avenue NE
425-637-2007
Distance: 1.1 miles SE

St. Luke's Lutheran Church
3030 Bellevue Way NE
425-822-7907
Distance: 1.0 miles

St. Thomas Episcopal Church
8398 NE 12th Street, Medina
425-454-9541
Distance: 2.49 miles W

First Congregational Church
752 108th Avenue NE
425-454-5001
Distance: 0.8 miles S

Blue Sky Church
1720 130th Avenue NE
425-566-5398
Distance: 2.2 miles E

Sacred Heart Roman Catholic Church
9460 NE 14th Street
425-454-9536
Distance: 1.2 miles SW



Laundry Self-Service

- Overlake Village**
Maytag Laundry
 14910 NE 24th St
 425- 881-0303
 Distance: 6.02 miles
- Kwik N' Cleaner**
 (also dry/cleaners)
 2311 156th Ave NE
 (425) 746-8813
 Distance: 4.81 miles



Supplies/Hardware/Auto

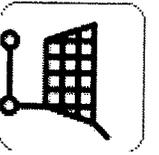
- Lowes Home Center**
 11959 Northup Way
 425-646-9031
 Distance: 2.69 miles
- Schuck's Auto Supply**
 15425 NE 24th St
 425-747-5888
 Distance: 4.68 miles
- Big 5 Sporting Goods**
 4055 Factoria Blvd SE
 425-747-5230
 Distance: 4.82 miles
- Sports Authority**
 44 Bellevue Way NE
 425-456-0600
 Distance: 1.47 miles

- Chown Hardware**
 12001 NE 12th Street
 425-454-7420
 Distance: 1.35 miles
- Home Depot**
 325 120th Ave NE
 425- 451-7351
 Distance: 1.78 miles



Medical / Pharmacy

- QFC - Pharmacy**
 2636 Bellevue Way NE
 425-822-4154
 Distance: 0.6 miles NW
- Bellegrove Pharmacy**
 1200-112th Ave. NE
 800-446-2123
 Distance: .74 miles
- Walgreens**
 10550 NE 8th Street
 425-590-4242
 Distance: 0.9 miles S
- Bartell's Drug Store**
 10116 NE 8th St.
 425-454-3111
 Distance: 0.8 miles S
- UW Medical Center - Eastside Specialty Ctr.**
 Accepts most health insurance plans. Persons w/ DSHS medical assistance programs are accepted if they are referred by a UW physician.
 1700 116th Avenue NE
 425-646-7777
 Distance: 1.21 miles
- Overlake Hospital Medical Center: Pharmacy**
 1135-116th Ave NE, #140
 425-289-3100
 Distance: 1.16 miles
- Eastgate Public Health Clinic**
 Services provided on a sliding scale for non-insured individuals
 14350 SE Eastgate Way
 206-296-4920
 Distance: 6.26 miles
 (Bus Route 249)
- HealthPoint**
 Medical and Dental Care to insured and non-insured individuals
 16315 NE 87th Street, B-6 Redmond -- 425-882-1697
 Distance: 8.2 miles
 (Bus Routes 243 to 545)
- Rotocare Free Medical Clinic**
 No appointments. Open Sat. from 9:30-11:30 am
 14812 Main Street
 Hopelink
 425-828-4304
 Distance: 4.1 miles
 (Bus Route 230)



Grocery Stores

QFC Quality Food Ctr.
2636 Bellevue Way NE
425-822-4154
Distance: 0.6 miles NW

Whole Foods Market
888 116th Avenue NE
425-462-1400
Distance: 1.3 miles SE

Ashwood Urban Market
989-112th Ave. NE
425-455-0373
Distance: 0.8 miles S

QFC Quality Food Ctr.
10116 NE 8th Street
800-201-6261
Distance: 1.2 miles SW

Walgreens
10550 NE 8th St.
425-590-4242
Distance: .09 miles S

Bartell Drug Co
1100 Bellevue Way NE
425-454-3111
Distance: 0.8 miles



Banks

Bank of America
10500 NE 8th St., # 400
425-467-9800
Distance: .94 miles

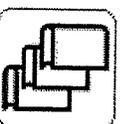
Wells Fargo
1130 Bellevue Way NE
425-462-5542
Distance: 0.7 miles S

Chase
10550 NE 8th St.
425-590-4242
Distance: 0.8 mi S

Express Credit Union
Hopelink-14812 Main St.
(Thursdays 10am-4pm)
14812 Main Street
206-529-7937
Distance: 4.17 miles



Post Offices/Library



US Post Office
Bellevue Main Office
1171 Bellevue Way NE
800-275-8777
Distance: .76 miles

King County Library
Bellevue Regional
1111 110th Avenue NE
425-450-1765
Distance: .67 miles



Legal Information

Catholic Community Services

Legal Action Center
100-23rd Ave. S., Seattle
206-328-5097
Distance: 11.6 miles

Eastside Legal Assistance Program

Address is confidential
(425) 747-7274

Northwest Women's Law Center

3161 Elliot Ave., Suite 101
206-682-9552
Distance: 10.38 miles



Bus Transportation

Metro Rider Information Line
(206) 553-3000

Routes at Major Intersections

Bellevue Way NE & NE 30th Pl
Distance: 0.92 miles
Route MT 230 Kirkland
Route MT 230 Totem Lake
Route MT 243 Jackson Park

Bellevue Way NE & NE 30th Pl

Distance: 0.92 miles
Route MT 230 Bellevue Transit Center
Route MT 243 Bellevue
Route MT 280 Renton (2:30am and 3:45am only)

98th Ave NE & NE 30th St

Distance: 1.26 miles W
Route MT 240 to Bellevue
Route MT 240 to South Renton Park & Ride

South Kirkland Park and Ride

108th Avenue and NE 38th Street, Kirkland
Distance 1.3 miles N

Bellevue Transit Center

NE 6th Street and 108th Avenue NE
Distance: .9 miles S

Kirkland Transit Center

3rd and Park Lane, Kirkland
Distance: 3.8 mile N



Crisis/Hospitals



Crisis Clinic - Crisis Line
 866-427-4747/206-461-3222/206-461-3219(TDD)
 or 211 (after 2-22-06)

Overlake Hospital
 1035 116th Avenue NE
 (425) 688-5000
 Distance: 1.2 miles SE

E. Domestic Violence Program
 Crisis Line
 800-827-8840

Group Health Eastside Hospital
 11511 NE 10th Street
 425-502-3000
 Distance: 1.3 miles E

King County Sexual Assault Resource Ctr.
 Crisis Line
 888-99-VOICE (86423)



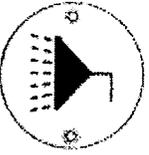
Taxes

Internal Revenue Service Tax Aide

Provides free income tax assistance. Services are provided at numerous locations throughout Washington State.
 800-829-1040 or 425-456-9637

Hopelink

Coordinates free tax preparation services at sites across King County from Jan 13 to April 15.
When: Tues., 1-5pm (add'l language - Chinese); Thurs., 1-9pm (add'l language - Spanish); Sat., 10am-2pm (add'l languages - Spanish & Russian)
 14812 Main Street
 425-943-7555
 Distance: 4.17 miles



Shower Facilities

Bellevue Aquatic Center

Preferred times are 8:00 am - 10:00am or 8:00pm - 9:00pm weekdays and 8:00am - 3:00pm weekends
 Fee: \$2.00
 601-153rd Avenue NE
 425-452-4444
 Distance: 3.7 miles E (Bus Route 230)



Government/ Municipal Court

Contents

Social Security Administration
505-106th Avenue NE, Suite 301
425-450-3936
Distance: 1.3 miles S

Bellevue City Hall
450 110th Avenue NE
425-452-4366
Distance: 1.10 miles

King County District Court
585 112th Avenue SE
206-205-9200 or 800-325-6165
Distance: 2.38 miles

Washington State Department of Social and Health Services (DSHS)
(see also under employment and food banks/feeding programs)
805-156th Ave.
206-341-7404 or 800-662-6715
Distance: 4.39 miles

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- All addresses are within Bellevue unless otherwise noted.

- All distances are calculated from First United Methodist Church

- If you need help locating any additional services, please call the Community Information Line at (206) 461-3200 or the Bellevue Human Services Division at (425) 452-6884.

NOTES

**First United Methodist Church
1934 108th Ave. NE
Bellevue, WA 98004
425-454-2059**

